



NCCP

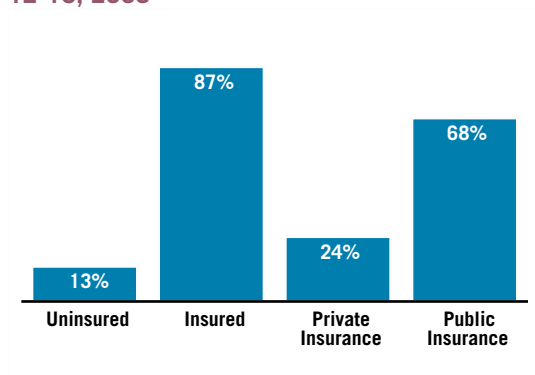
National Center for Children in Poverty
Mailman School of Public Health
Columbia University

UNITED STATES ADOLESCENT PROFILE

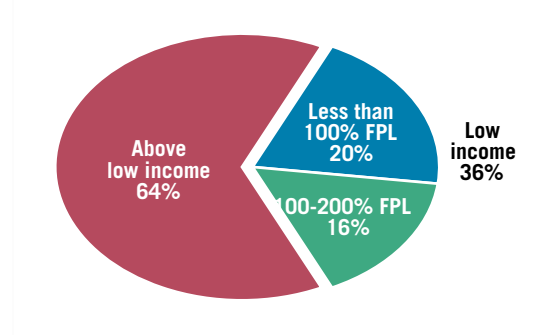
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This national profile provides data on adolescents in the United States and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

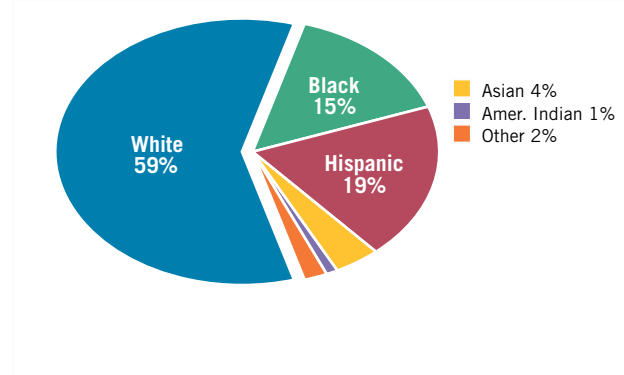
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



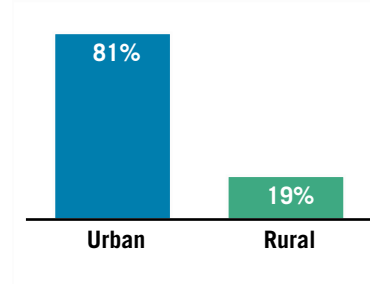
Family Income Among Adolescents Aged 12-18, 2008¹



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



HEALTH

State Choices to Promote Access

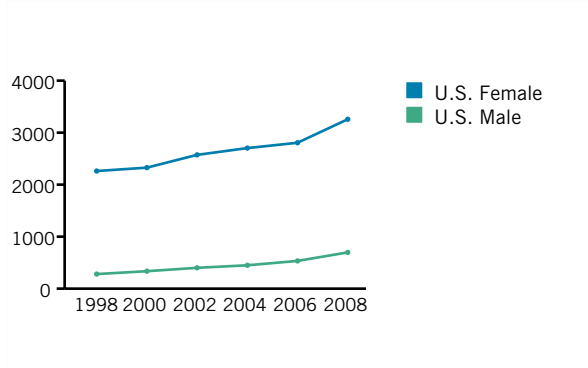
Promotion, Prevention, and Early Intervention

- **15** states set the income eligibility limit for public health insurance at or above 200% of the federal poverty level (FPL) - Medicaid [2009]⁴
- **47** states set the income eligibility limit for public health insurance at or above 200% of the federal poverty level (FPL) - CHIP health insurance at or above 200% of the federal poverty level (FPL) - CHIP [2009]⁴
- **22** states extend CHIP to cover legal immigrant children [2010]⁵
- **11** states maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶
- **28** states use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- **45** states require CHIP coverage for contraceptives [2006]⁸
- **36** states have a public school health education curriculum that requires HIV prevention education [2006]¹⁰
- **31** states have a public school health education curriculum that requires STI prevention education [2006]¹⁰
- **30** states have a public school health education curriculum requires pregnancy prevention education [2006]¹⁰
- **30** states require physical activity and fitness taught in schools [2006]¹⁰
- **6** states recognize SBHCs as a participating provider for CHIP [2008]¹¹
- **11** states require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

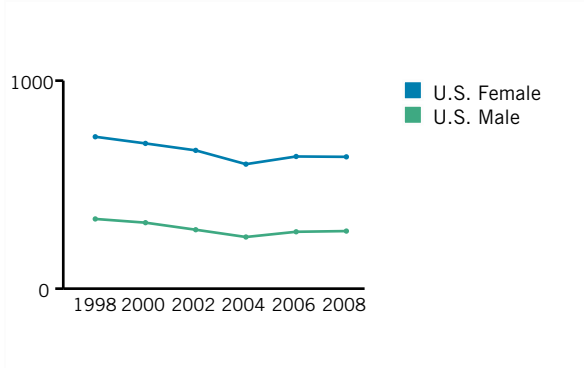
Services in Schools

- **19** states provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - **11** states recognize SBHCs as a participating provider for Medicaid [2008]¹¹

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

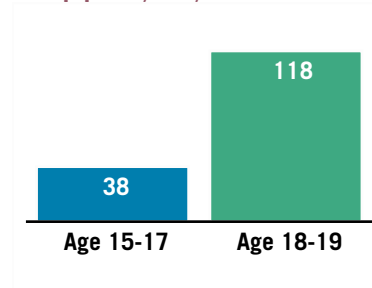
- **50** states allow minors to consent to prenatal care [2010]¹⁴
- **47** states allow minors to consent to contraceptive and family planning services [2010]¹⁴
- **50** states allow minors to consent to HIV and STI prevention and treatment services [2010]¹⁴
- **51** states allow minors to consent to medical care for their own children [2010]¹⁴
- **17** states allow minors to consent to abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

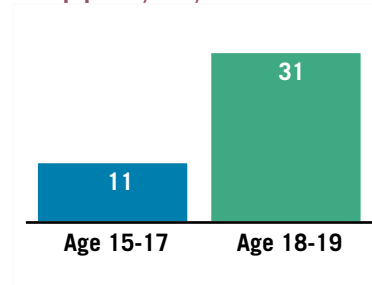
Promotion, Prevention, and Early Intervention

- **27** states have an EPSDT screening periodicity schedule that meets recommendations of American Academy of Pediatrics - 5 Screenings for children 10-14 years [2009]¹⁵
- **29** states have an EPSDT screening periodicity schedule that meets recommendations of American Academy of Pediatrics - 4 Screenings for children 15-18 years [2009]¹⁵
- **36** states require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸
- **17** states have a program office dedicated to SBHCs [2008]¹¹
- **24** states require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- **28** states require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- **10** states have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- **16** states specify time requirements for physical education [2006]²¹

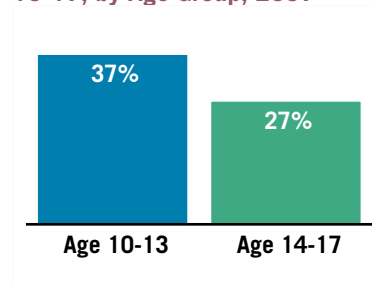
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- **38** states have a public school health education curriculum that requires drug/alcohol prevention education [2006]¹⁰
- **1** state has legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²²

Services in Schools

- **7** states require districts or schools to provide counseling for emotional or behavioral disorders [2006]²³
- **11** states require districts or schools to provide crisis intervention for personal problems [2006]²³
- **15** states require districts or schools to provide suicide prevention services [2006]¹²

Law and Legislation

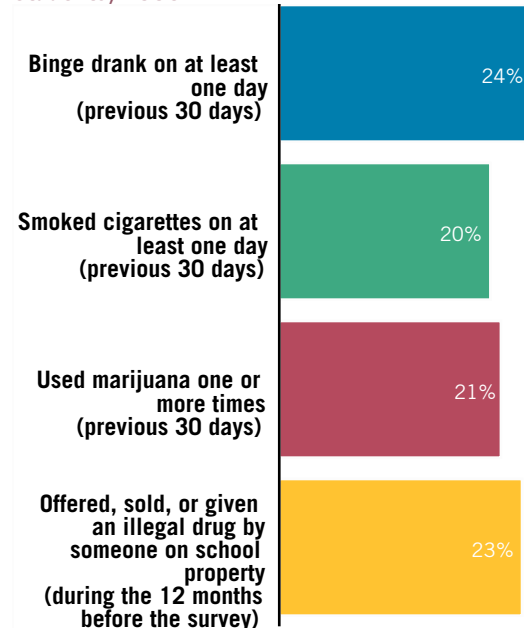
- **24** states allow minors to consent to outpatient mental health care [2010]²⁴
- **46** states allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

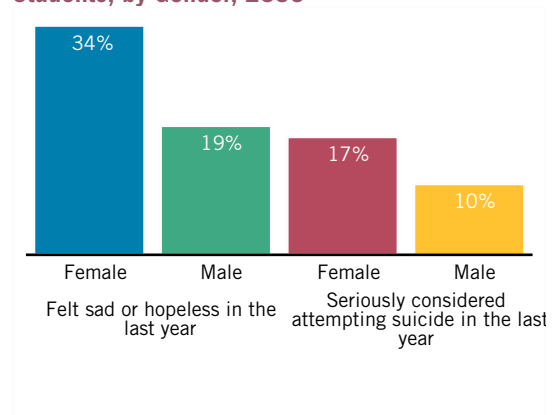
Workforce Development

- **48** states require certification by a state agency or board for newly hired school counselors [2006]²⁵
- **48** states require certification by a state agency or board for newly hired school psychologists [2006]²⁵
- **46** states require certification by a state agency or board for newly hired school social workers [2006]²⁵
- **31** states provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

68% Easily upset

61% Lost temper easily

61% Felt angry a lot

51% Had nervous or worried feelings keep you from doing things you want to do?

52% Felt lonely too much of the time

70% Had something very bad or terrifying happen to you

67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- **30** states require injury and violence prevention and safety taught in schools [2006]¹⁰

Law and Legislation

- **47** states require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- **3** states require bicycle helmets on riders 17 and younger [2010]²⁹
- **29** states ban all cell phone use for adolescent novice drivers [2010]²⁹
- **38** states ban texting while driving for adolescent novice drivers [2010]³⁰
- **3** states stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- **12** states require school curricula to address dating violence [2010]³³

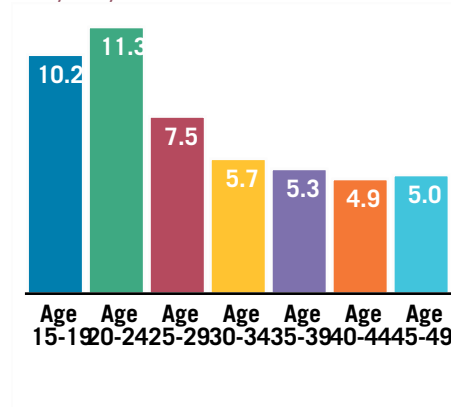
Workforce Development

- **39** states provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- **13** states have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- **51** states have graduated driver licensing system [2010]³⁵
 - **9** states require learner's entry age at 16 [2010]³⁵
 - **49** states require learner's holding period at least 6 months [2010]³⁵
 - **43** states require practice driving certification at least 30 hours [2010]³⁵
 - **10** states require night driving restriction at 9 or 10pm [2010]³⁵
 - **43** states restrict underage passengers to 1 or 2 [2010]³⁵
 - **6** states require that restrictions last until age 18 [2010]³⁵

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- **22** states have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - **43** states allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - **46** states have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - **10** states allow minors to petition for protection orders [2009]³⁶
 - **15** states allow victims to petition for restraining order against a minor [2009]³⁶
 - **12** states require school curricula to address dating violence [2010]³³

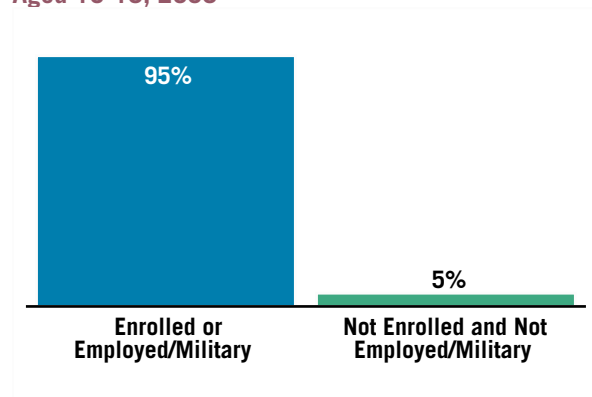
YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- **21** states set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- **51** states provide funding for after-school/ out-of-school time programs for youth [2010]³⁸
- **10** states fund mentoring initiatives [2010]³⁹
- **10** states allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- **43** states provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁴¹

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



Transition to Adulthood

- **40** states fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- **11** states fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- **25** states use the Compact Rate formula to measure graduation rate [2010]⁴⁴

Transition to Adulthood

- **48** states have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- **12** states collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²

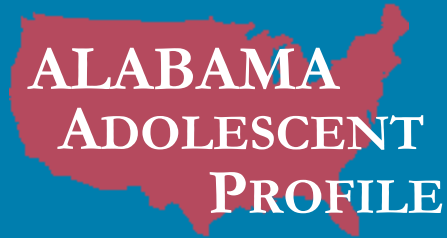
- **31** states provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- **37** states allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁴⁶

Law and Legislation

- **41** states have a legislative youth advisory council or commission [2009]⁴⁷



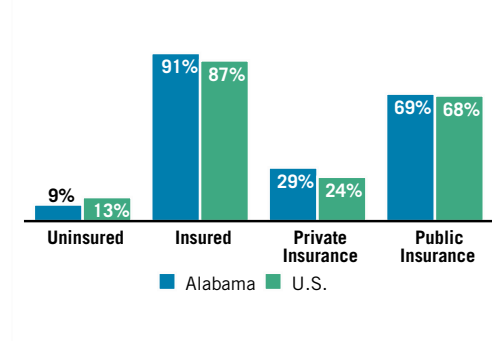
National Center for Children in Poverty
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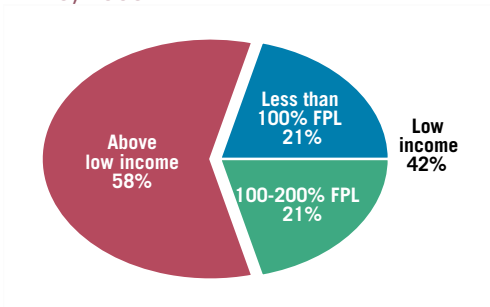
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Alabama's 424,233 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

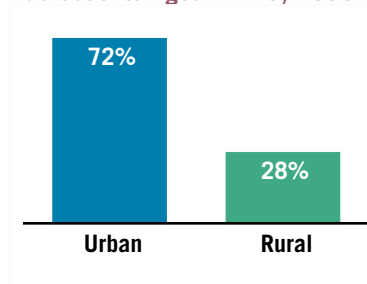
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



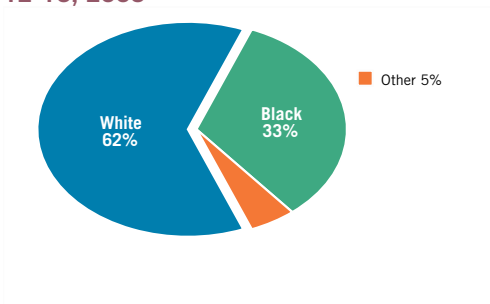
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

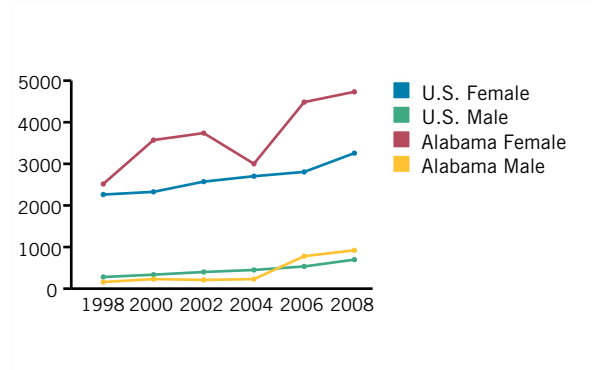
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁴⁹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

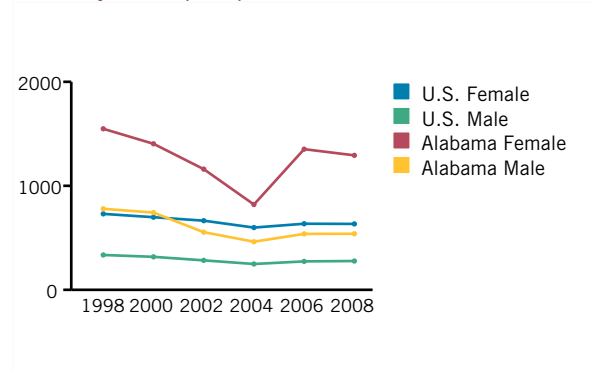
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]⁵³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁵⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

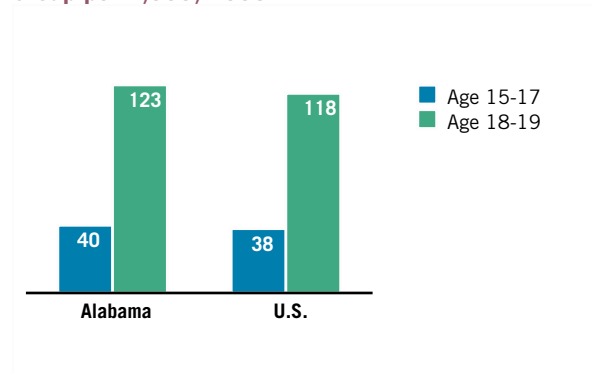
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

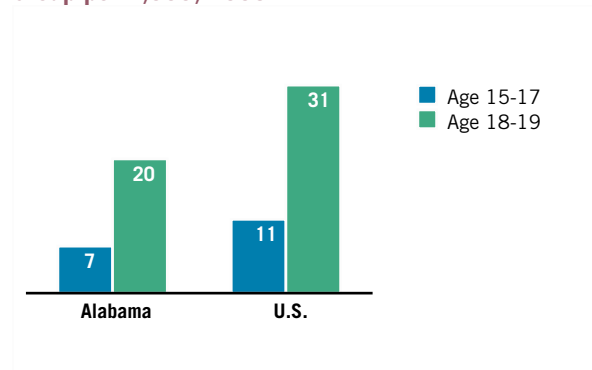
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

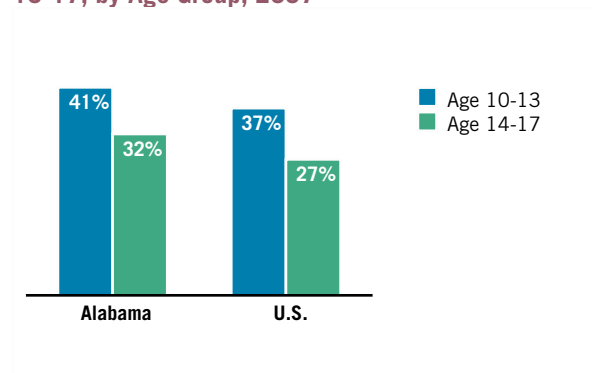
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

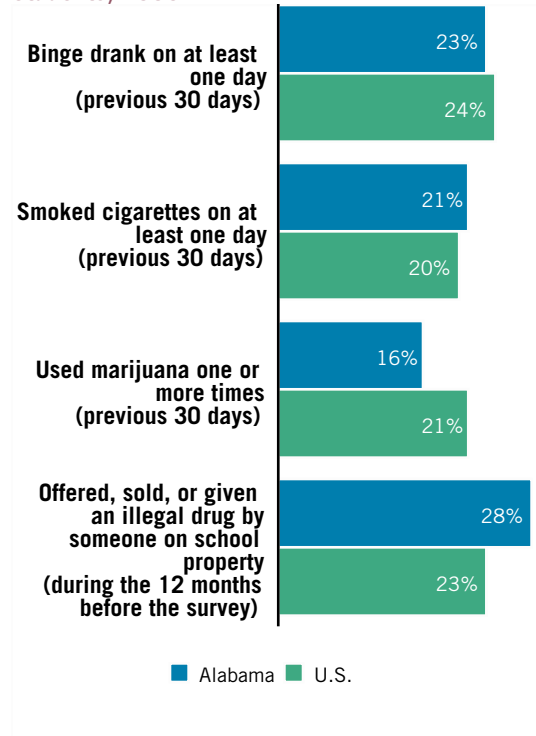
- Allow minors to consent to outpatient mental health care [2010]⁵⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

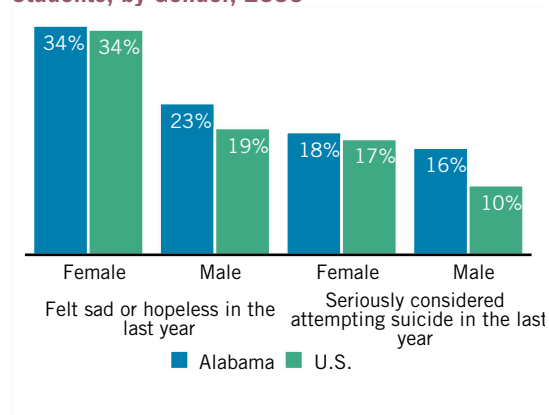
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

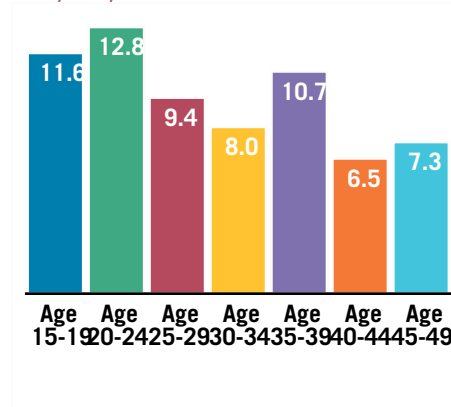
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]⁵⁷
- Ban texting while driving for adolescent novice drivers [2010]⁵⁸
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

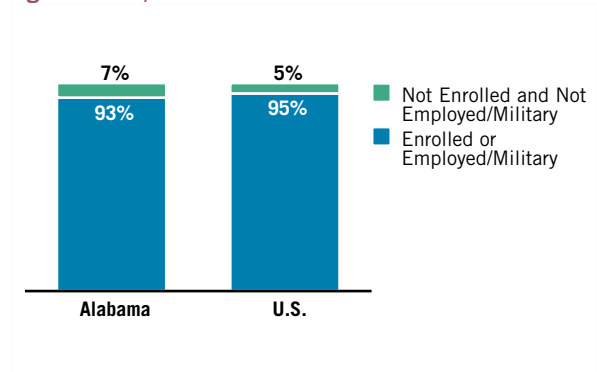
YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴



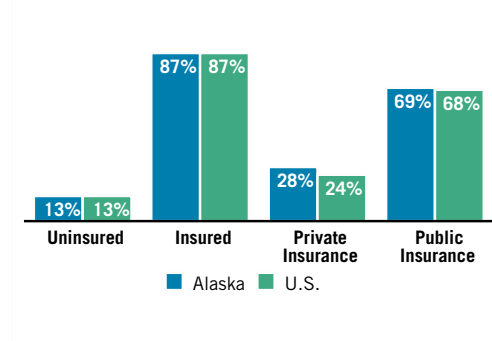
National Center for Children in Poverty
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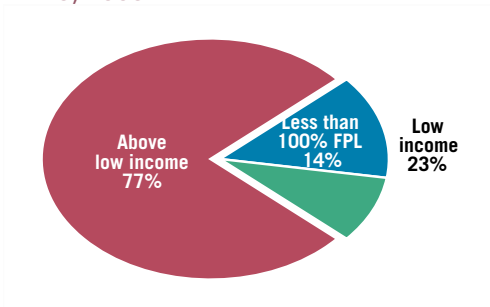
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Updated: June 1, 2011

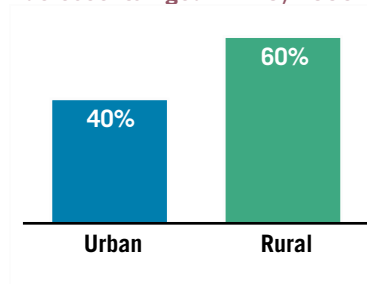
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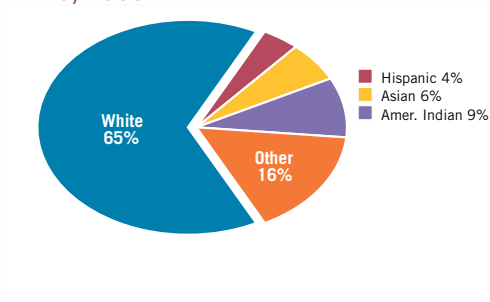
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

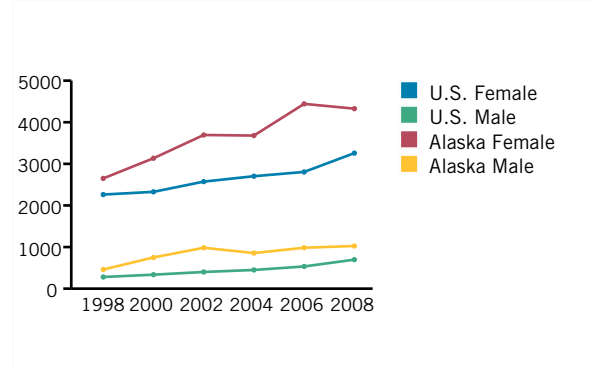
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- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

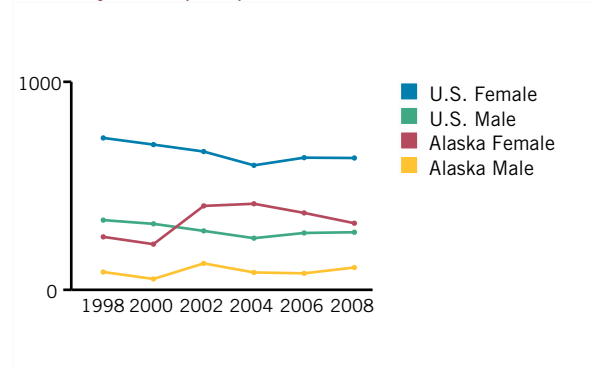
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

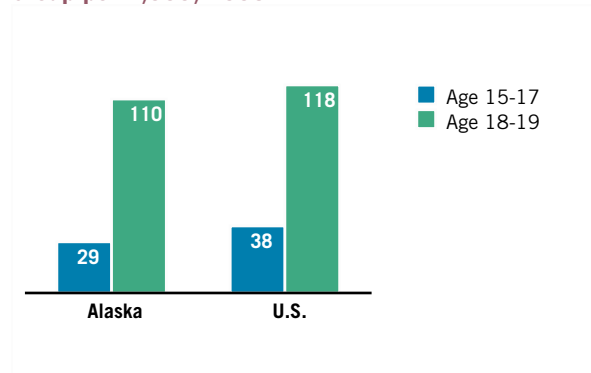
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

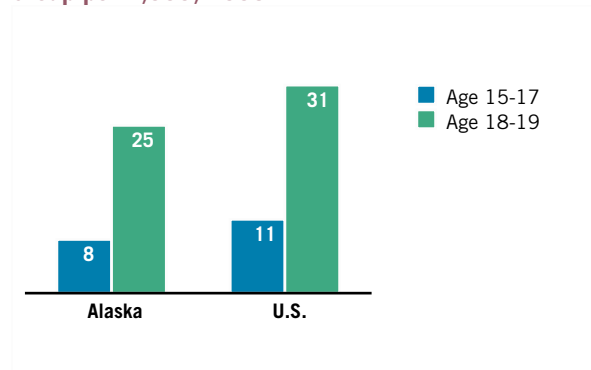
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

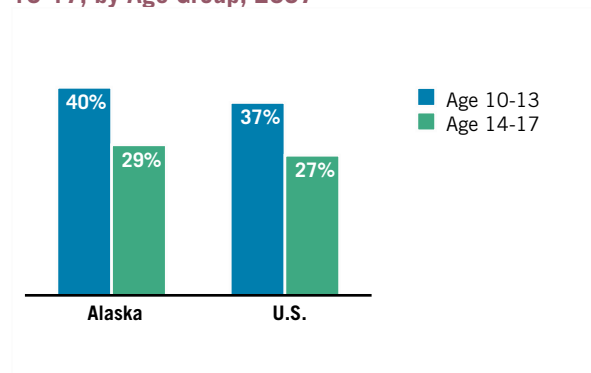
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

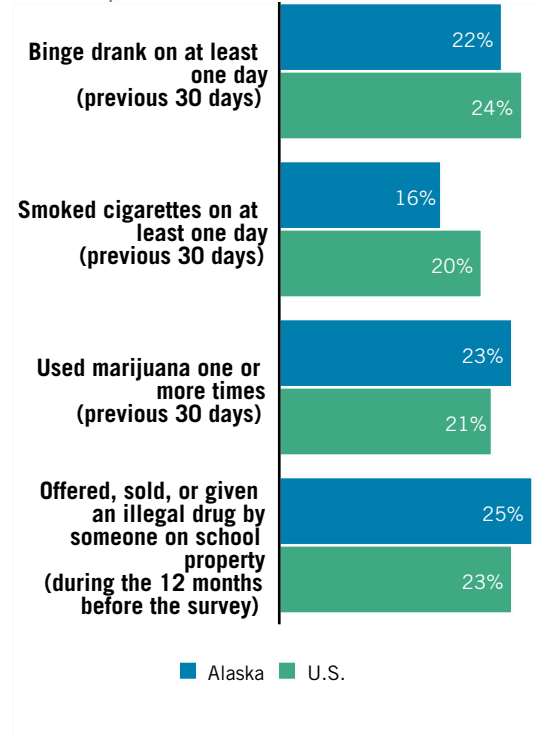
- Allow minors to consent to outpatient mental health care [2010]⁶⁸
- Allow minors to consent to care for drug or alcohol abuse [2010]⁶⁸

State Choices to Promote Quality

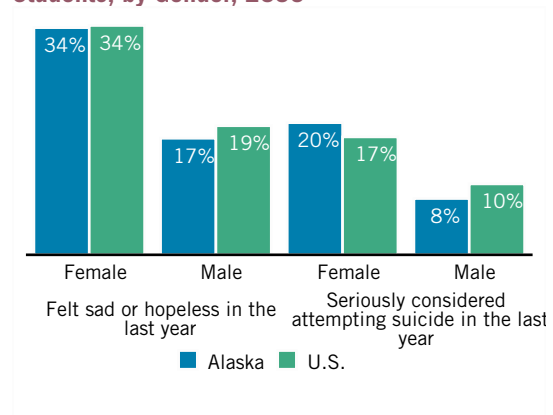
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

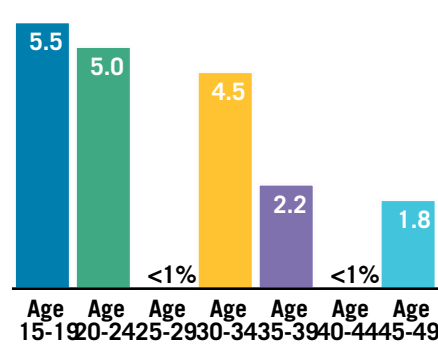
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

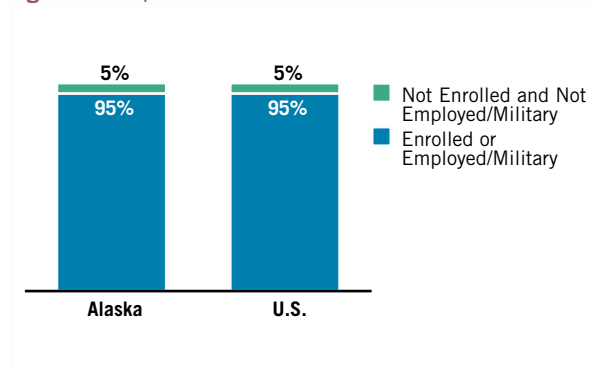
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





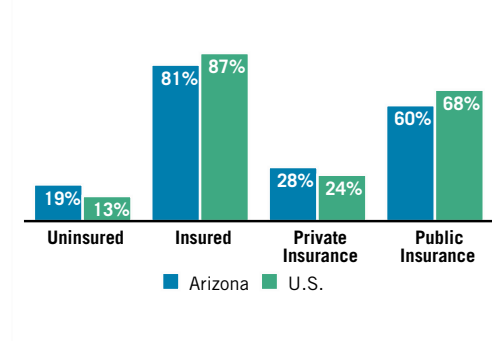
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



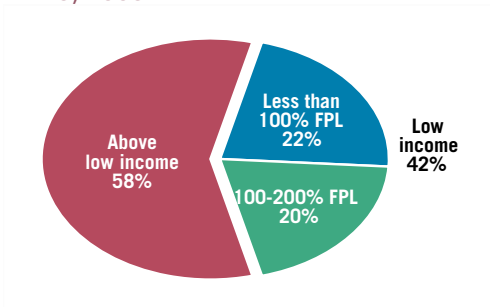
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Arizona's 610,253 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

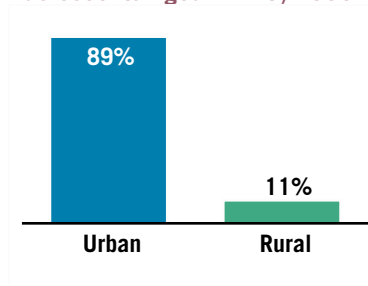
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



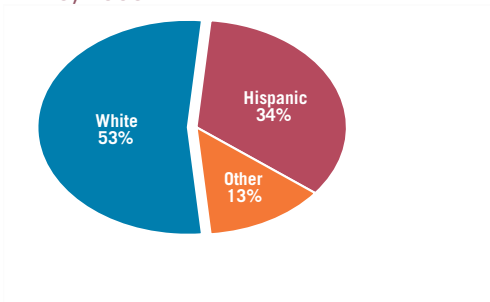
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

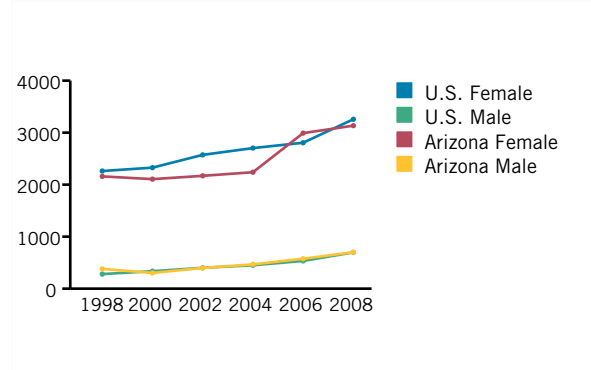
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁷²
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

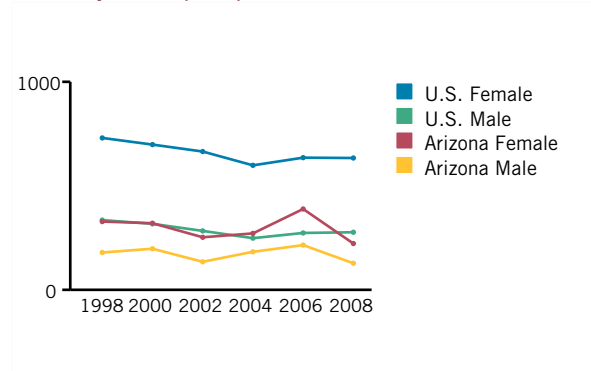
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁷³
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]⁷⁵

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

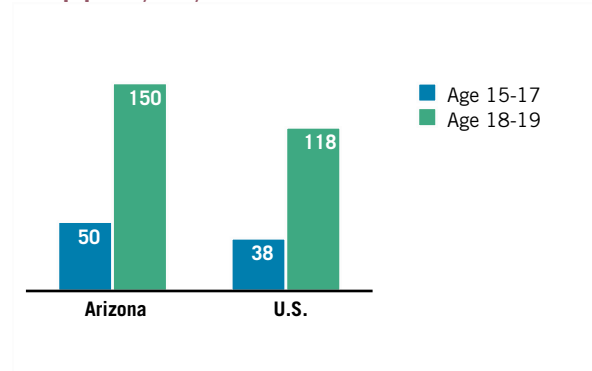
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

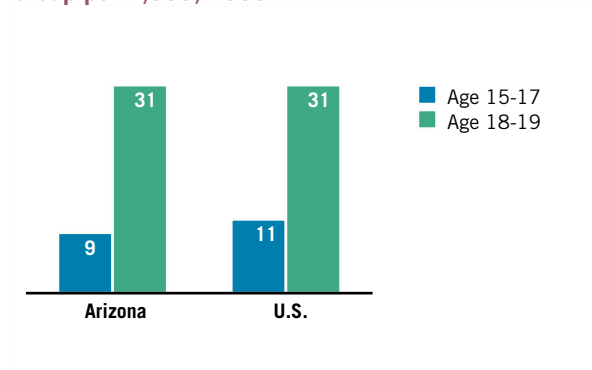
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

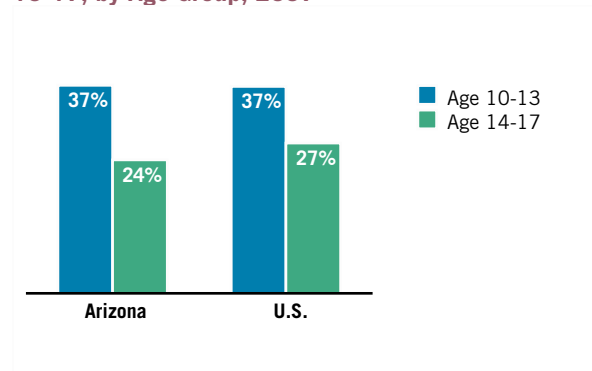
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

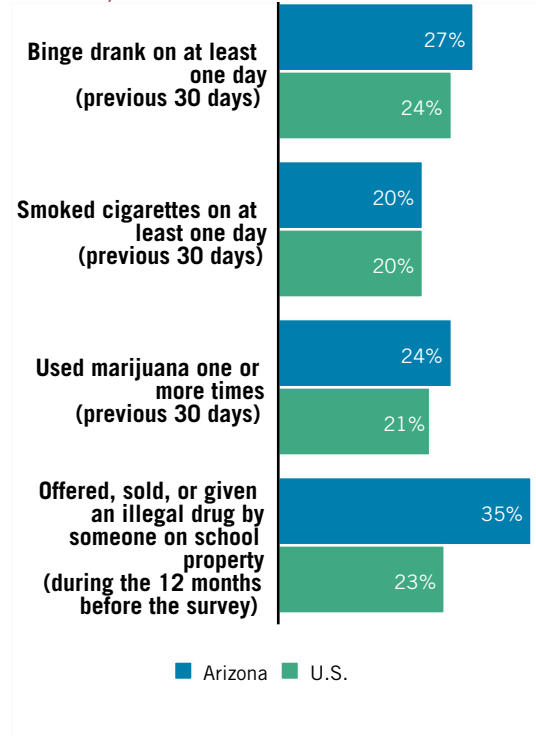
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]⁷⁷

State Choices to Promote Quality

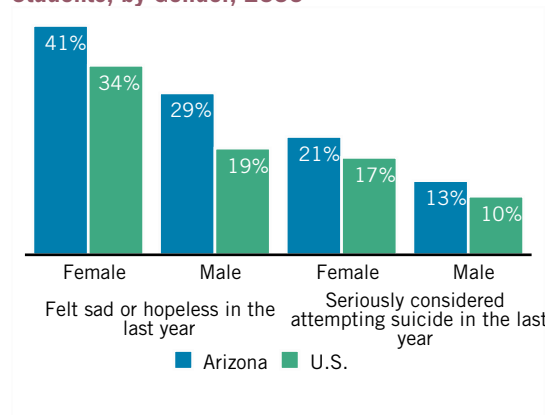
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

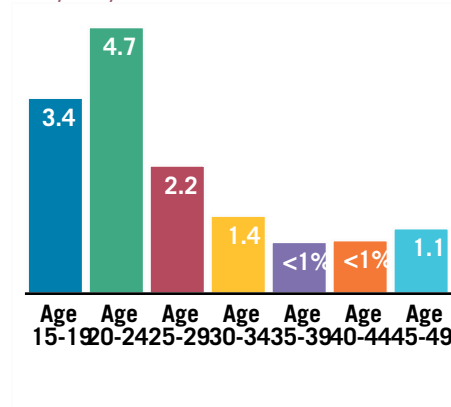
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]⁷⁸
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

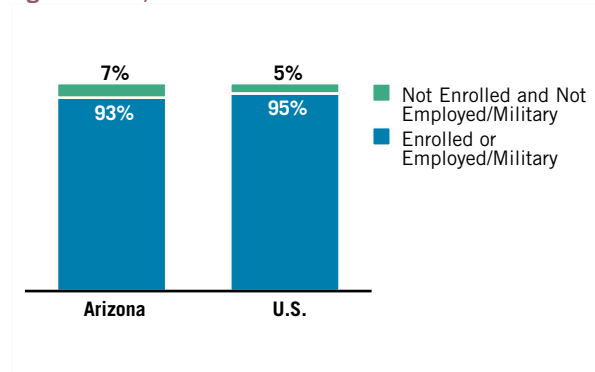
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

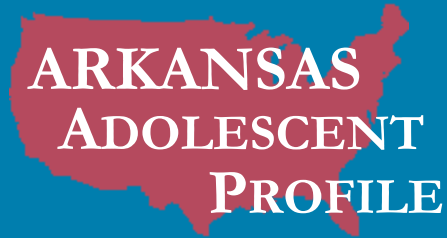
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





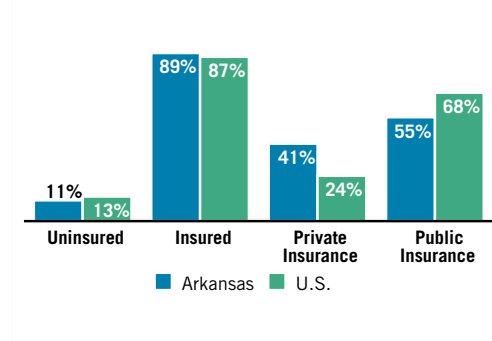
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



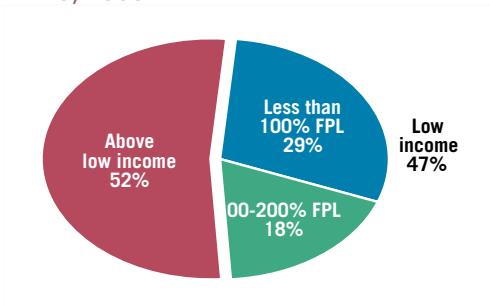
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Arkansas's 253,203 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

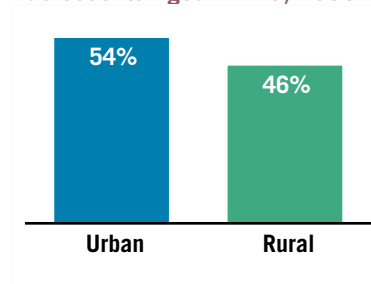
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



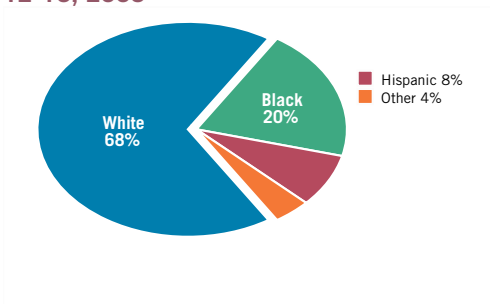
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

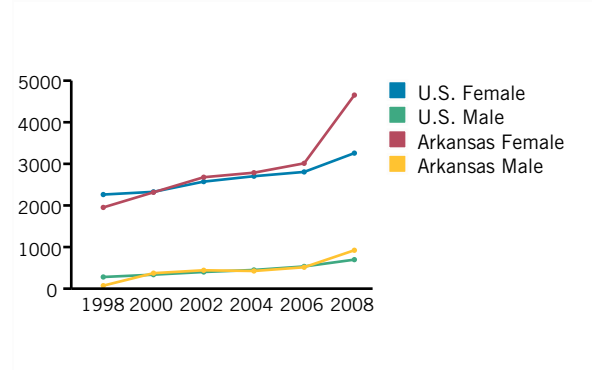
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁷⁹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁸⁰
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

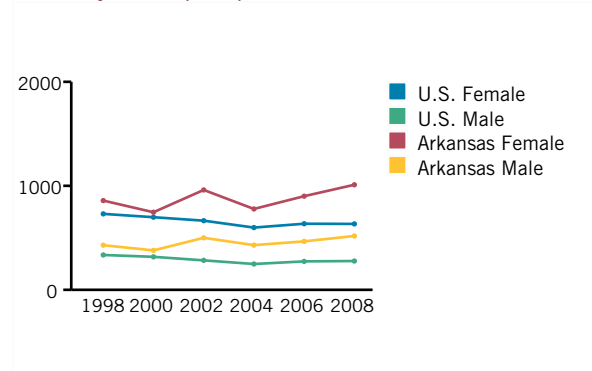
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁸¹
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁷⁵

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

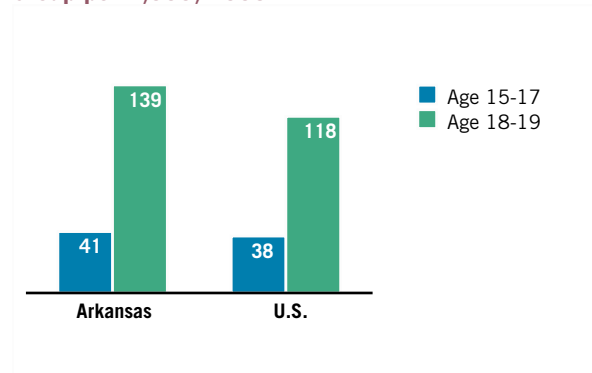
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

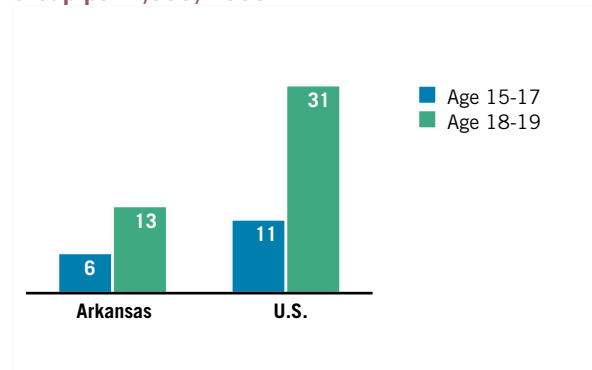
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

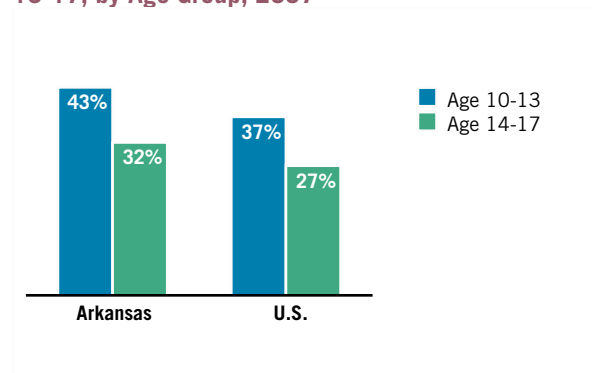
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

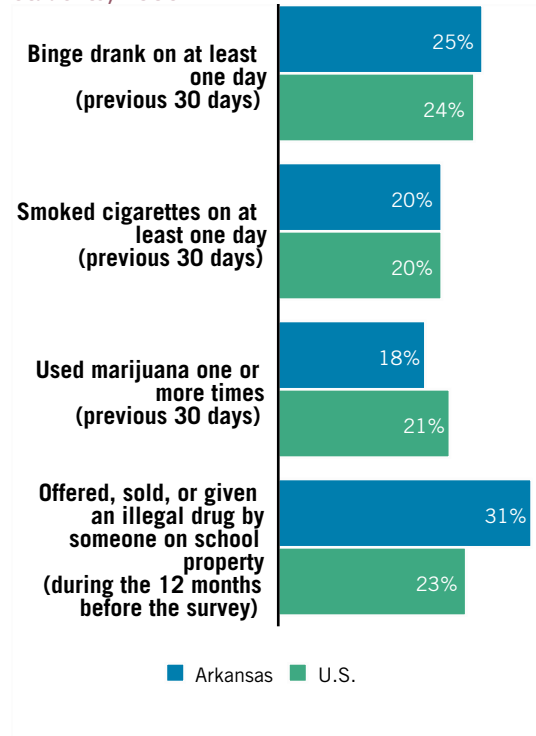
- Allow minors to consent to outpatient mental health care [2010]⁸²
- Allow minors to consent to care for drug or alcohol abuse [2010]⁸²

State Choices to Promote Quality

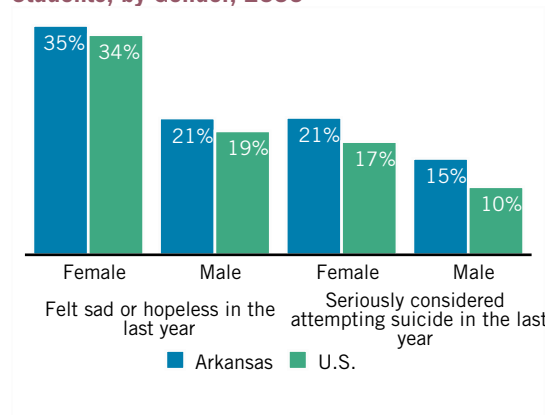
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

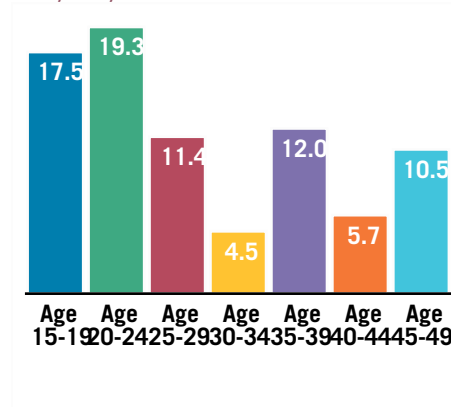
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]⁸³
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

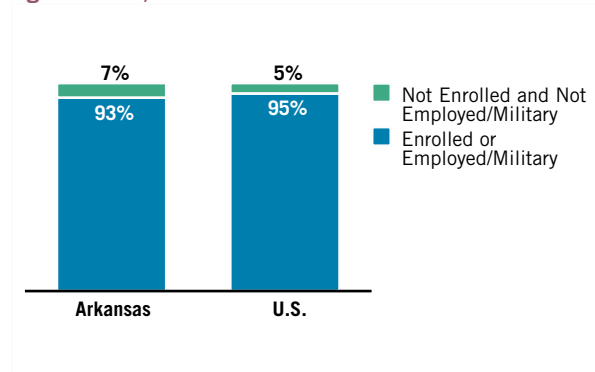
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

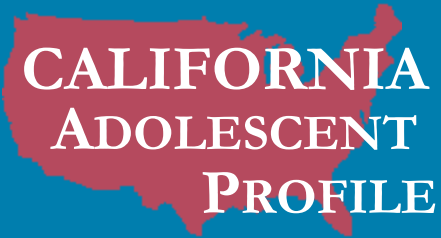
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





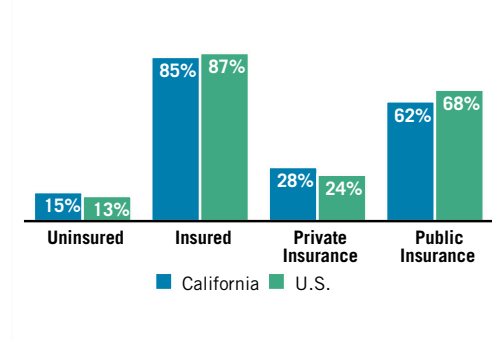
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



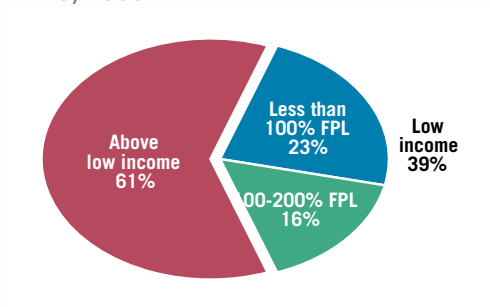
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on California's 3,586,098 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

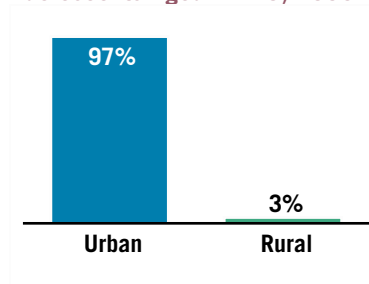
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



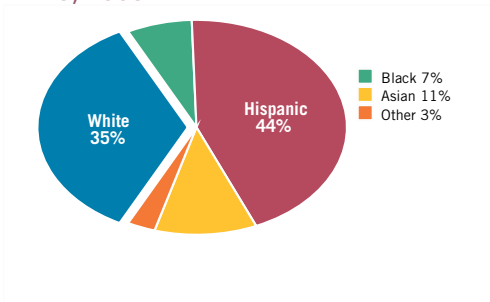
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

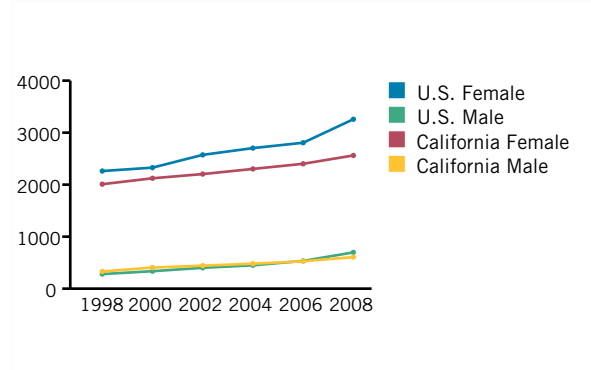
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁸⁴
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

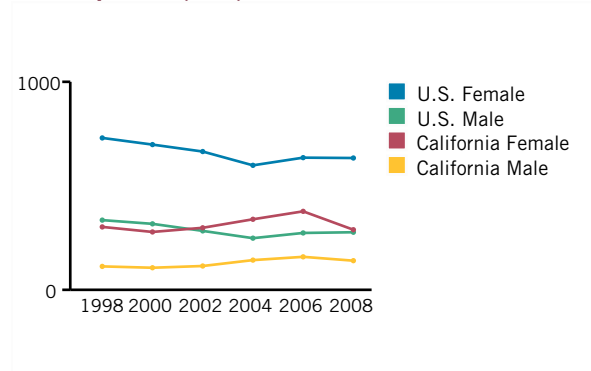
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁸⁵
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

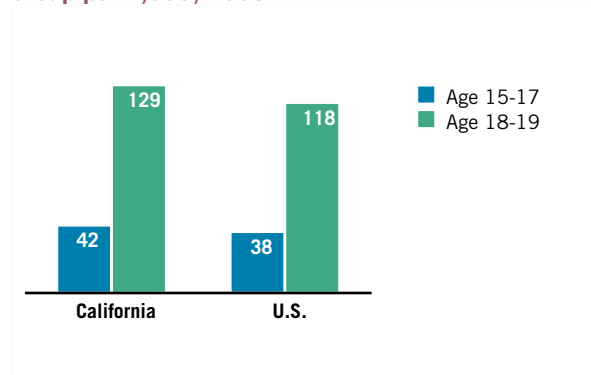
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

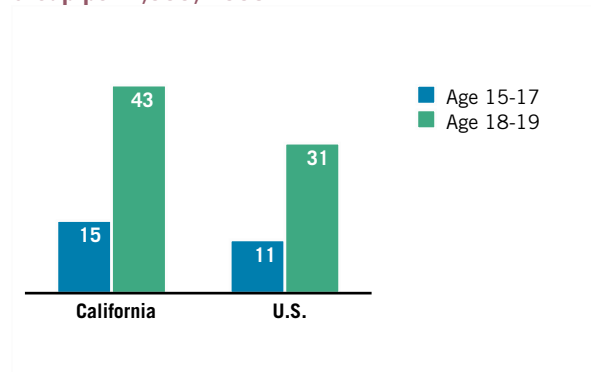
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

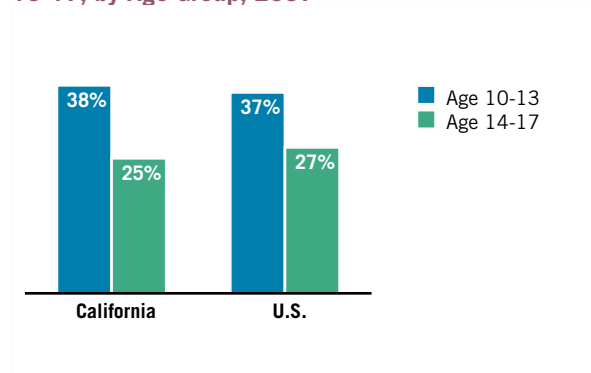
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁸⁶

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

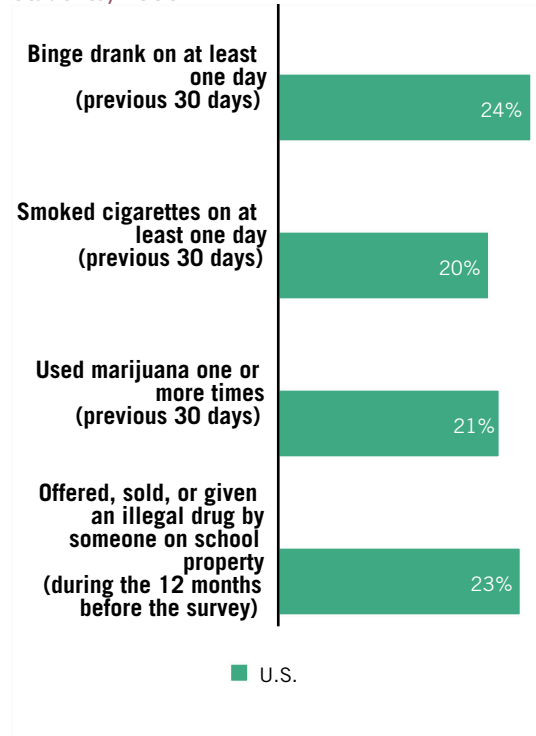
- Allow minors to consent to outpatient mental health care [2010]⁸⁷
- Allow minors to consent to care for drug or alcohol abuse [2010]⁷⁷

State Choices to Promote Quality

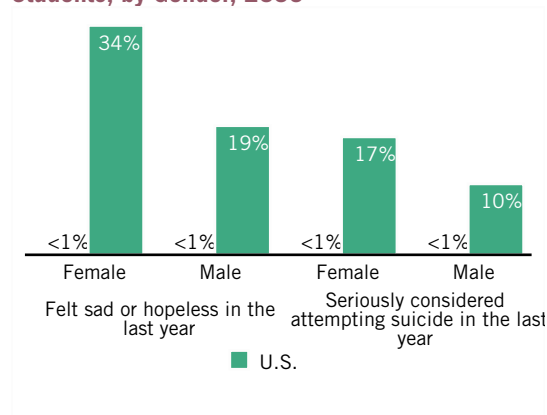
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

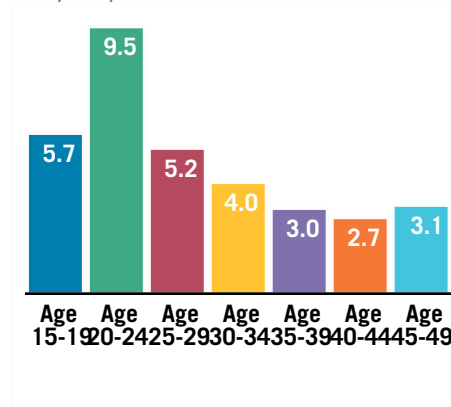
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]⁸³
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁸⁸

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁸⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁹⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁸⁸

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

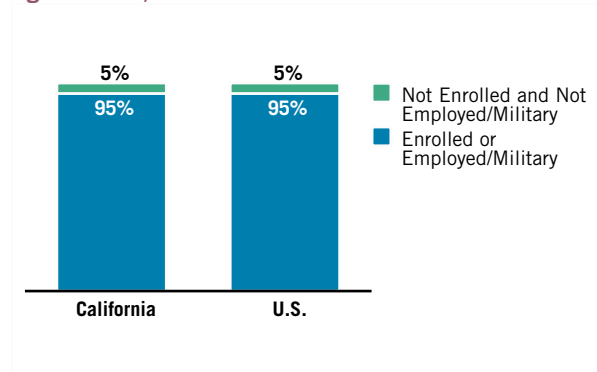
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

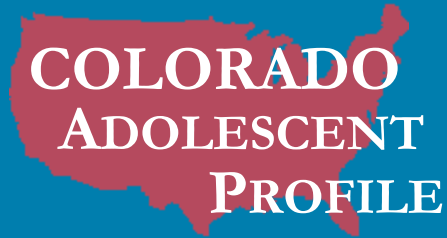
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





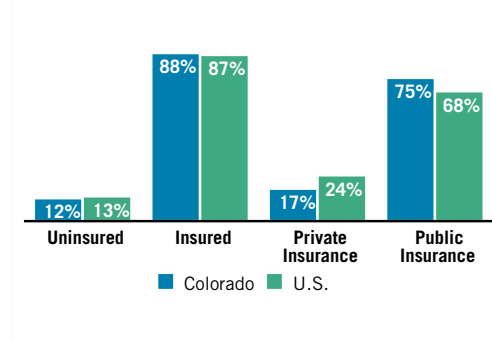
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



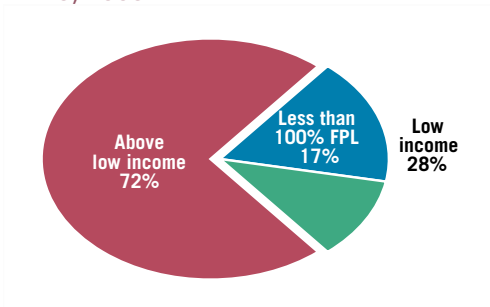
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Colorado's 431,197 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

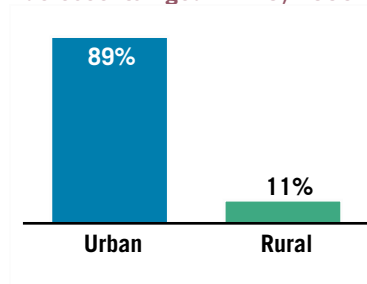
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



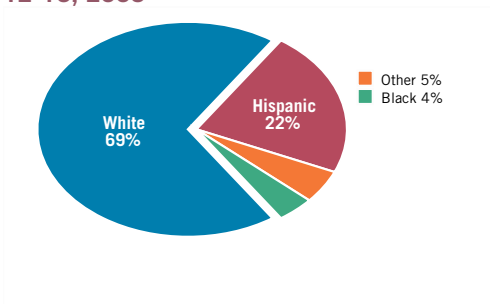
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

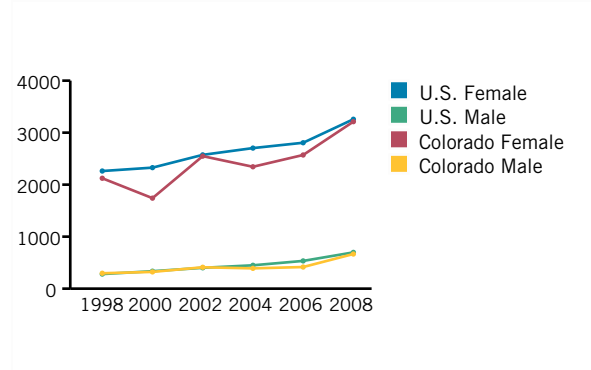
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁹¹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁹²
 - STI prevention education [2006]⁹²
 - Pregnancy prevention education [2006]⁹²

- Require physical activity and fitness taught in schools [2006]⁵¹

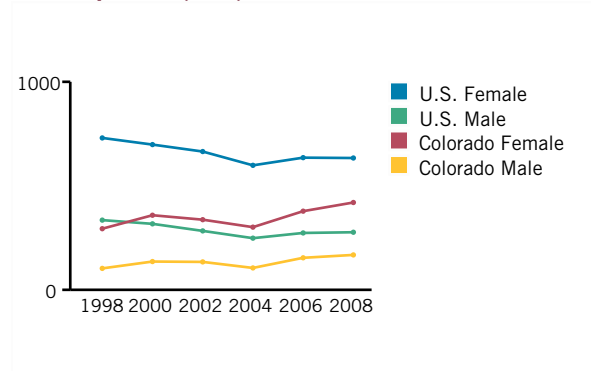
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]⁹³
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]⁹⁴

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁹⁵
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁹⁶

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

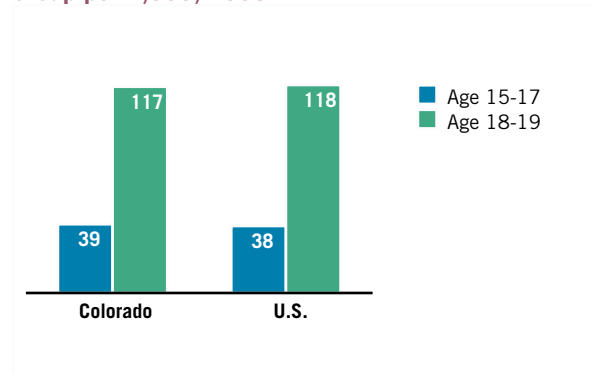
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

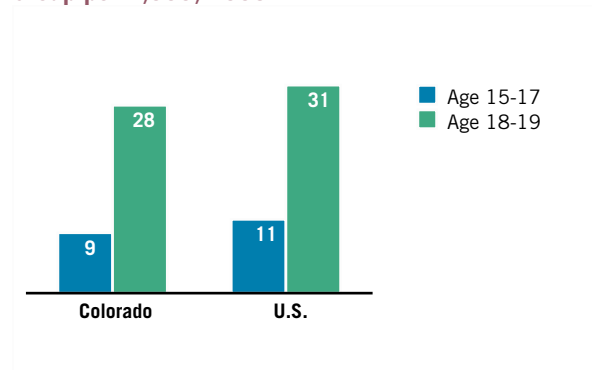
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

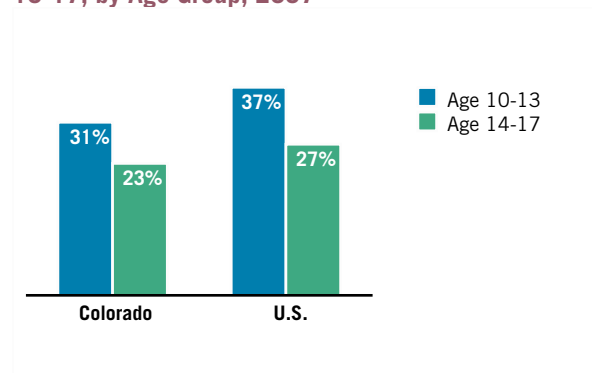
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁹²
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁹⁸

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]⁹⁹
- Suicide prevention services [2006]⁹⁴

Law and Legislation

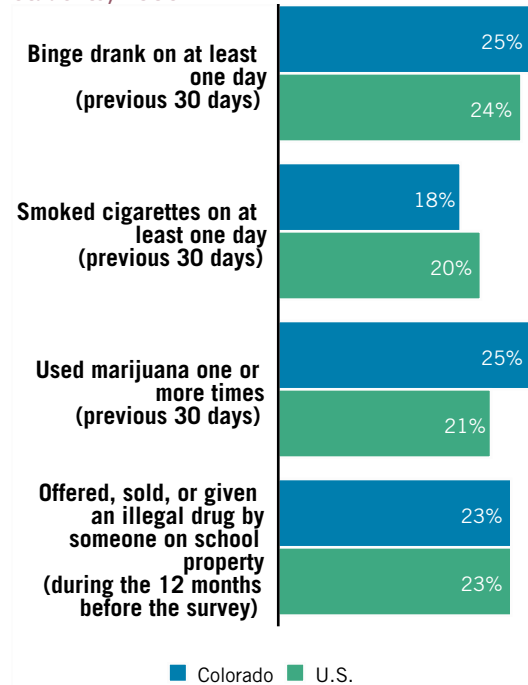
- Allow minors to consent to outpatient mental health care [2010]¹⁰⁰
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

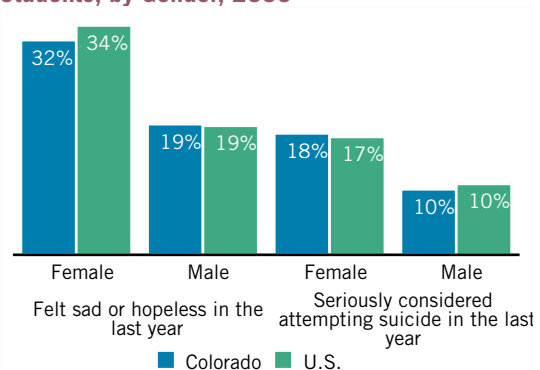
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

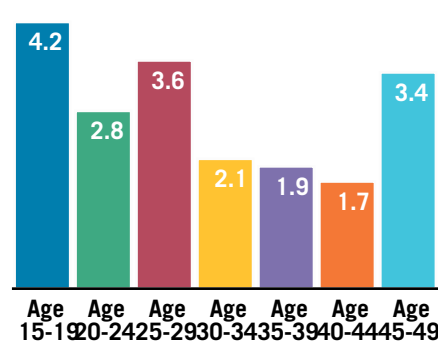
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]¹⁰¹
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]¹⁰²
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]¹⁰³

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]¹⁰⁴

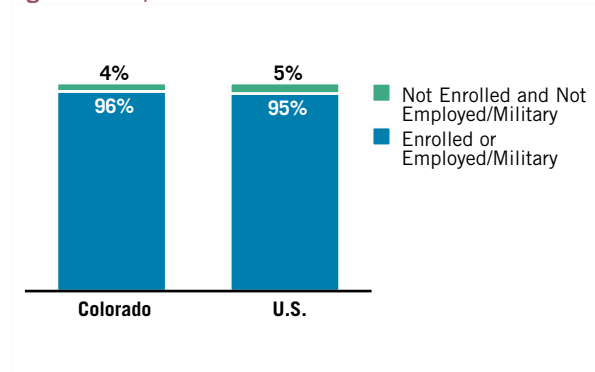
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





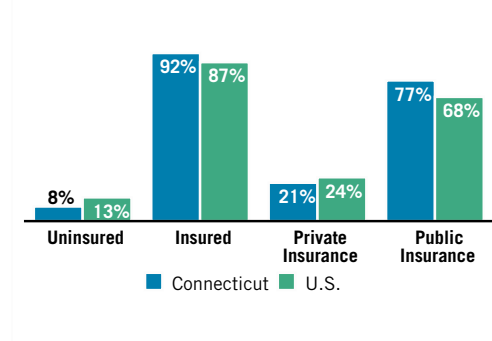
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



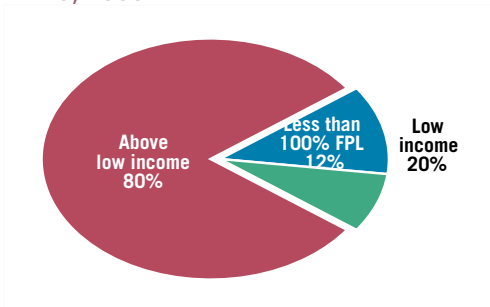
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Connecticut's 329,216 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

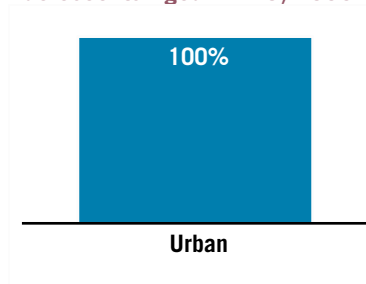
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



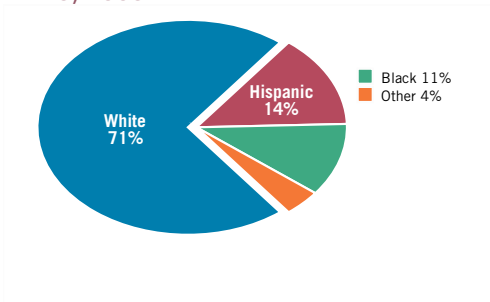
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

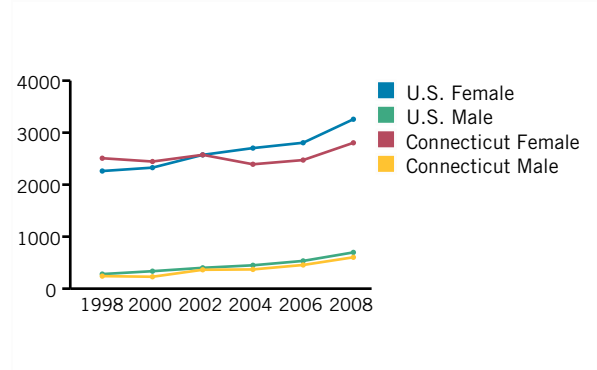
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹⁰⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

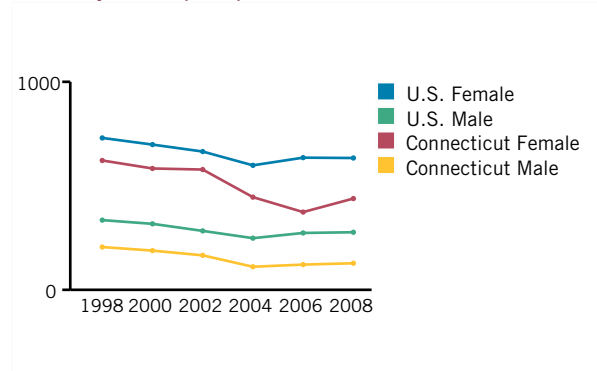
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁰⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

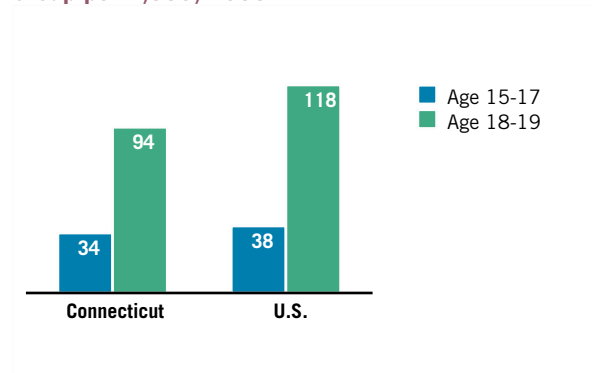
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

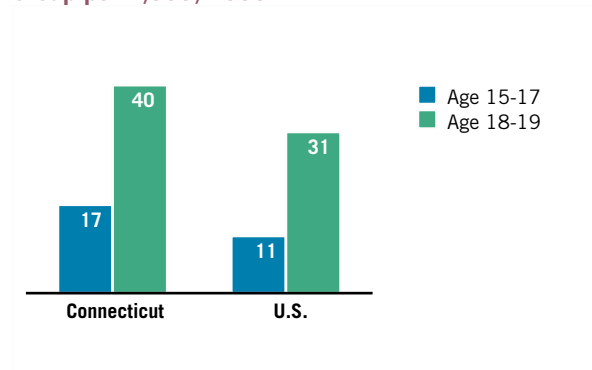
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

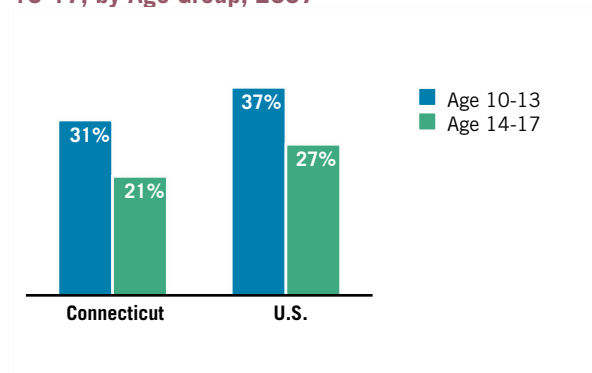
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

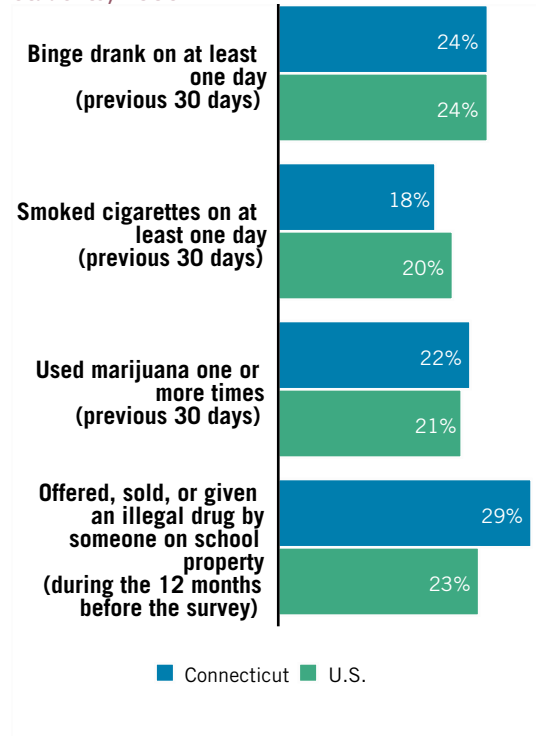
- Allow minors to consent to outpatient mental health care [2010]¹⁰⁷
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

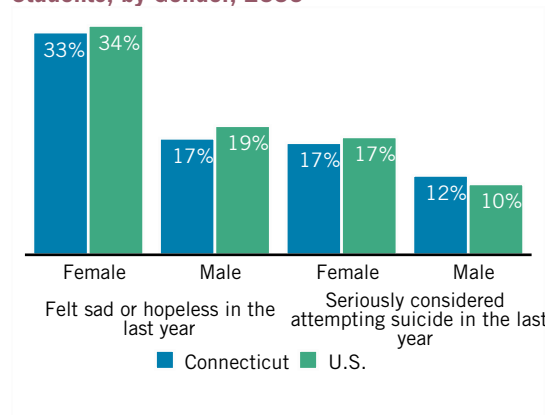
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

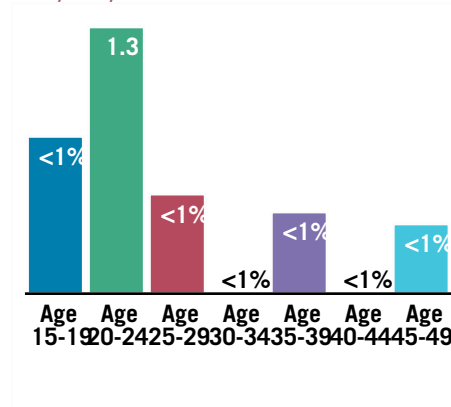
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁰⁸
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]¹⁰⁹
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

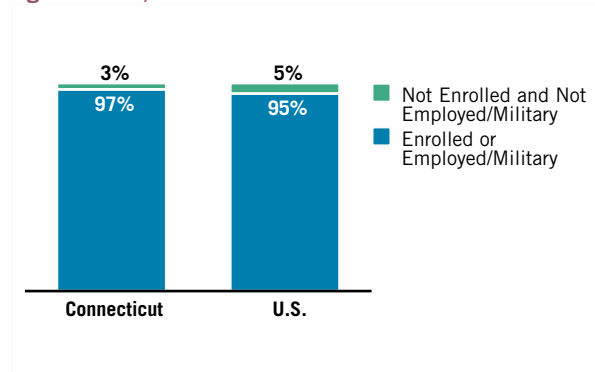
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

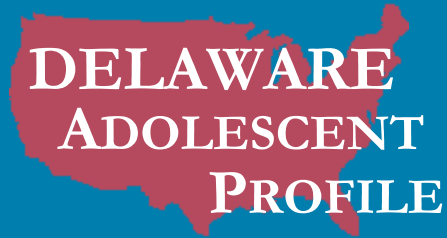
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





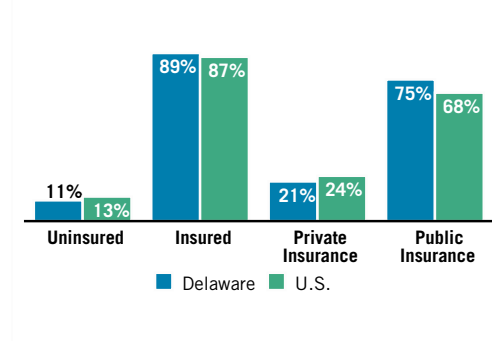
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



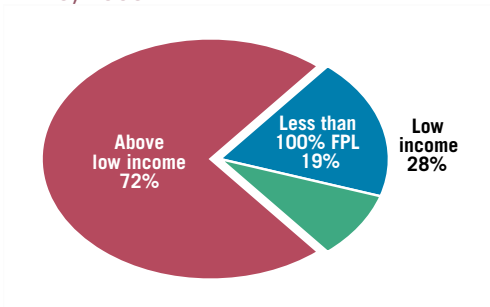
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Delaware's 76,739 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

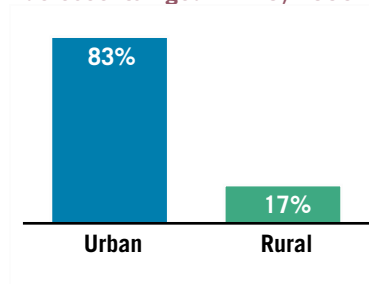
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



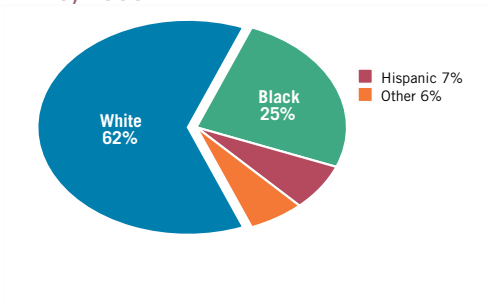
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

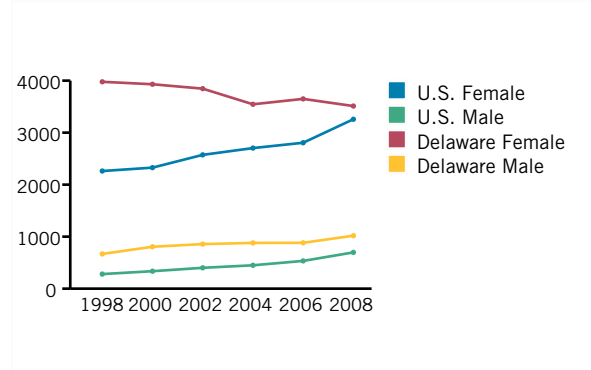
- Medicaid [2009]¹¹¹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹¹²
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

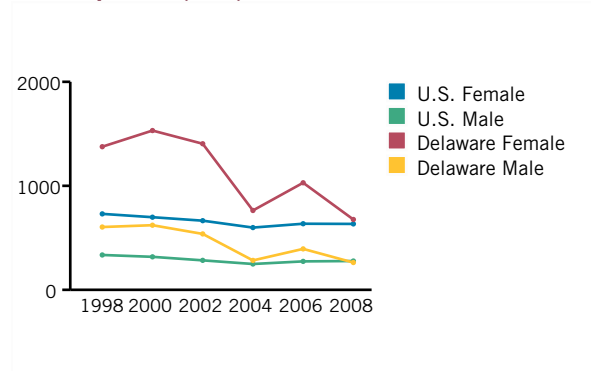
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹¹⁴
- Contraceptive and family planning services [2010]¹¹⁵
- HIV and STI prevention and treatment services [2010]¹¹⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹¹⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

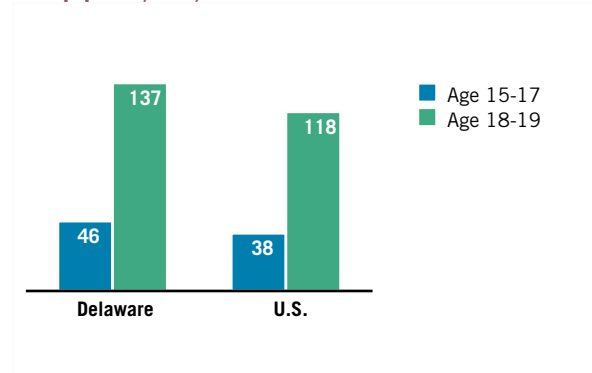
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

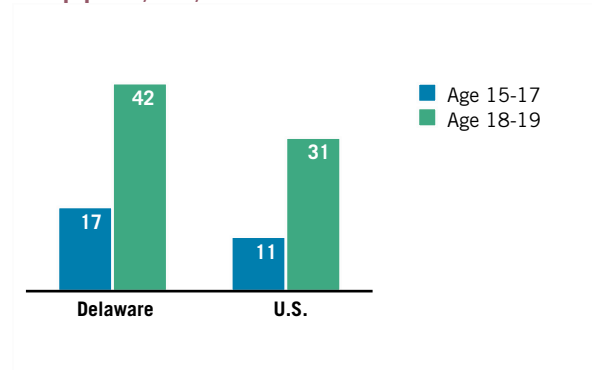
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

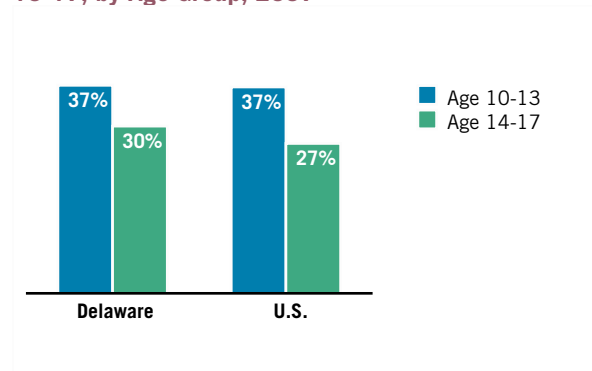
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

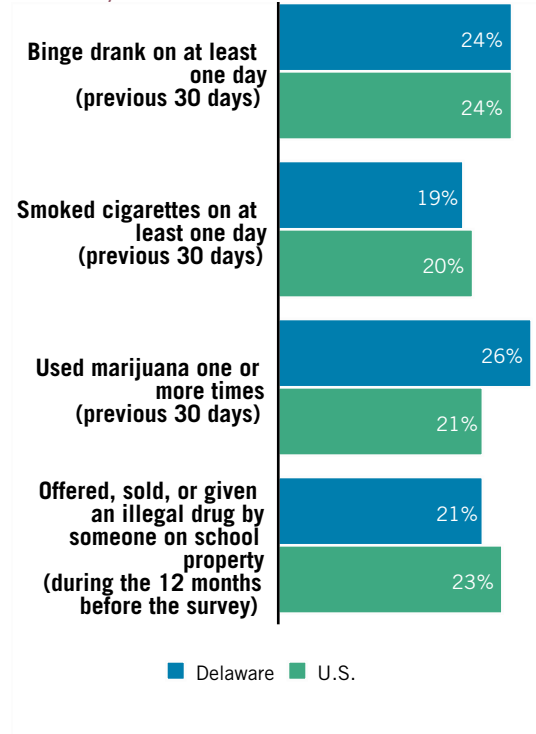
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
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State Choices to Promote Quality

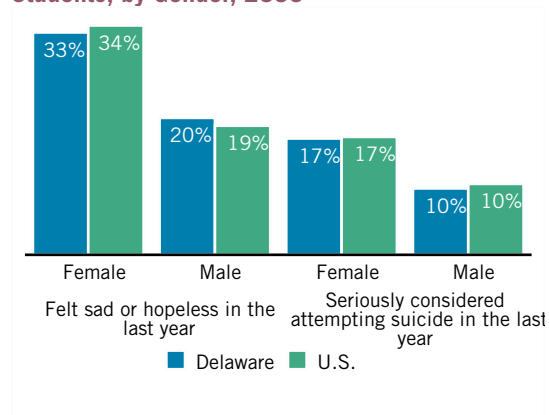
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹¹⁸
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹¹⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

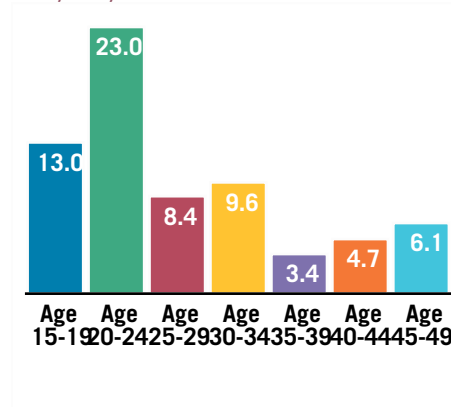
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

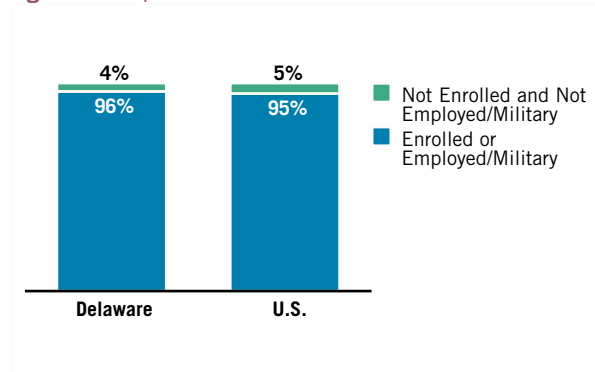
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

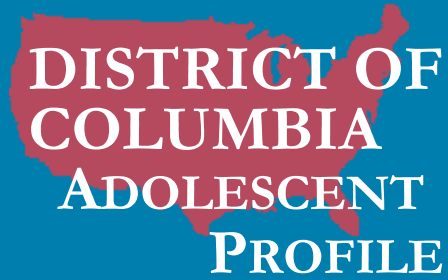
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





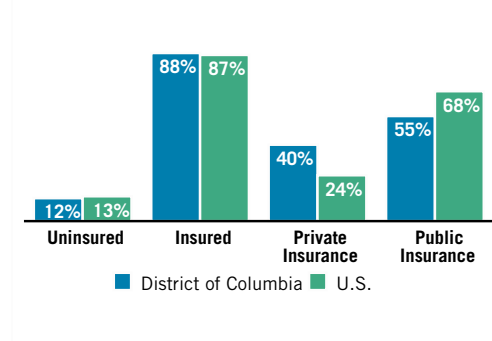
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



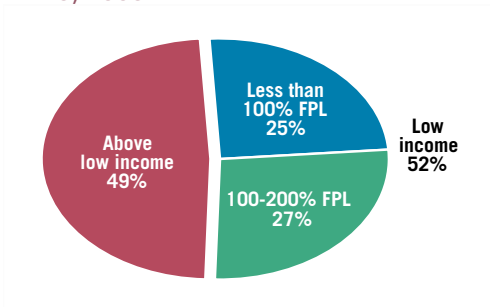
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Updated: June 1, 2011

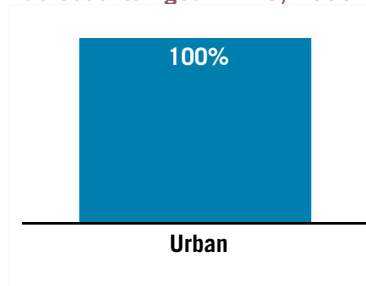
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



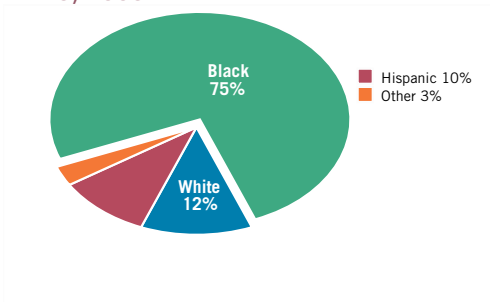
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

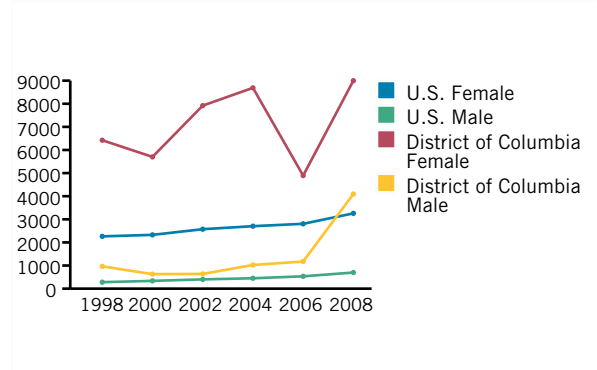
- Medicaid [2009]⁴
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 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

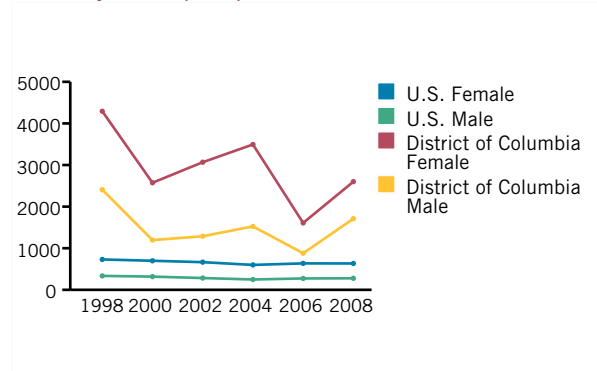
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

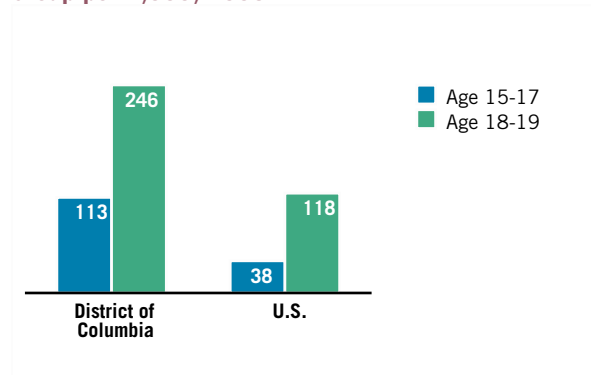
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

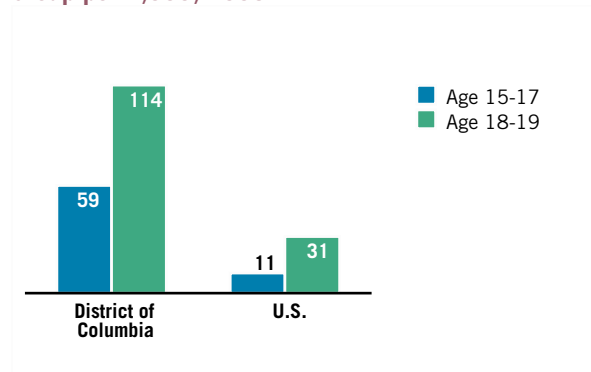
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

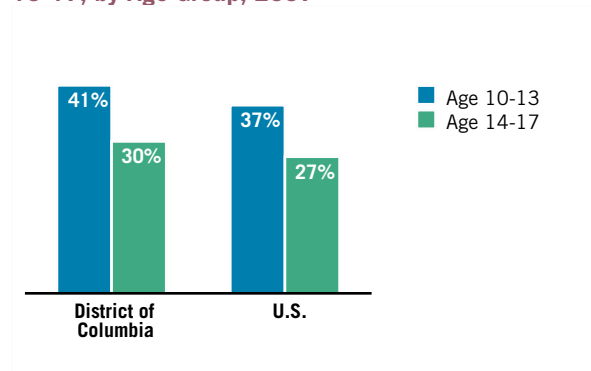
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

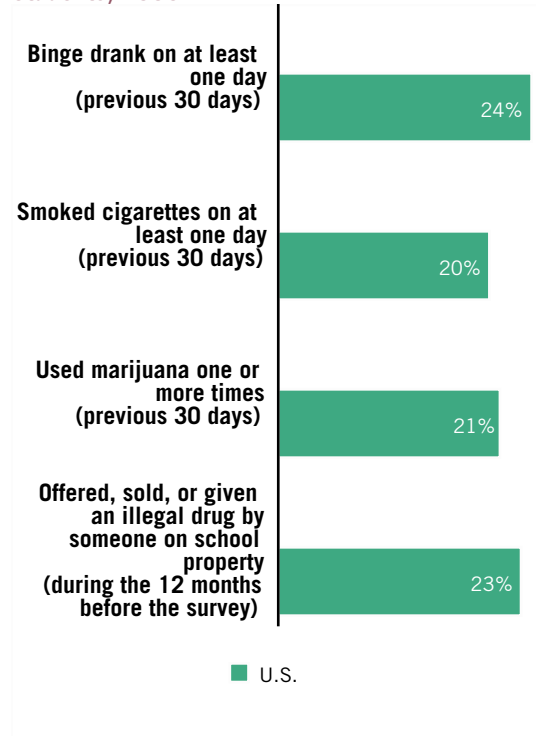
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

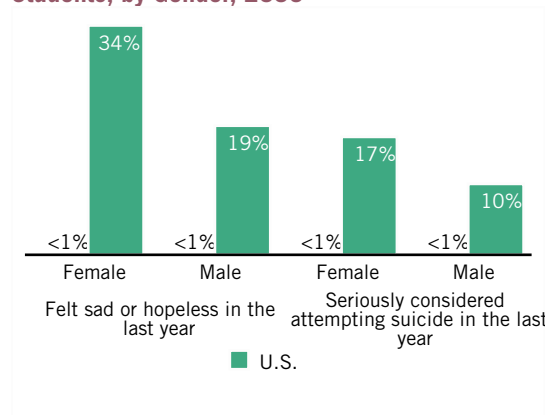
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹²⁰
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁰⁸
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

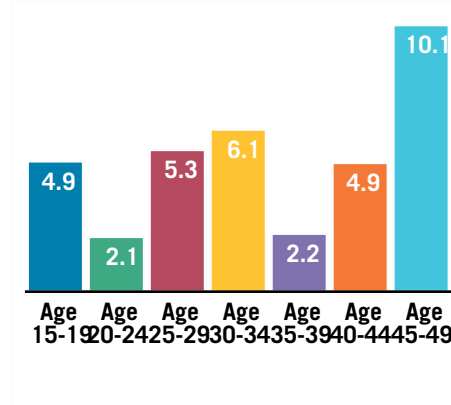
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁹⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

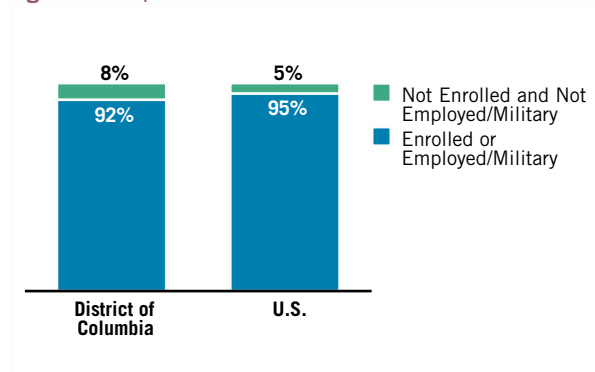
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

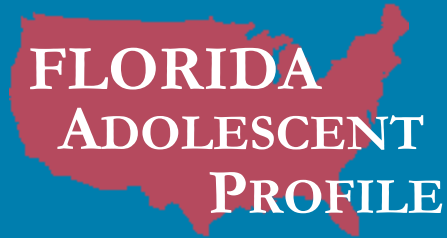
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





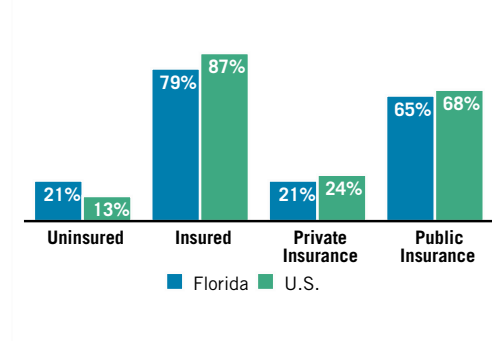
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



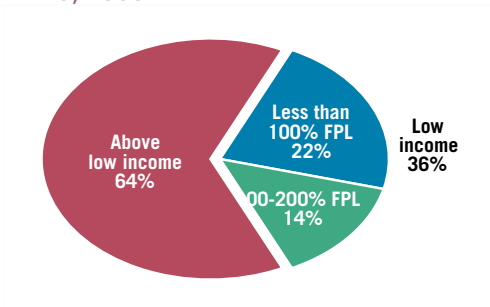
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Florida's 1,534,481 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

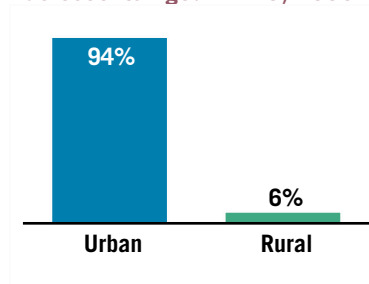
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



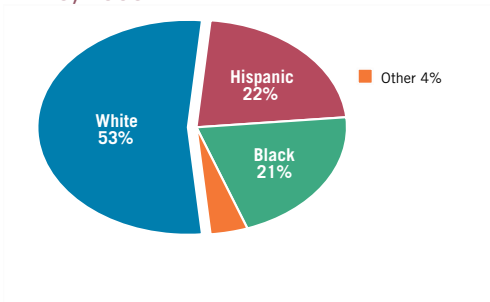
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

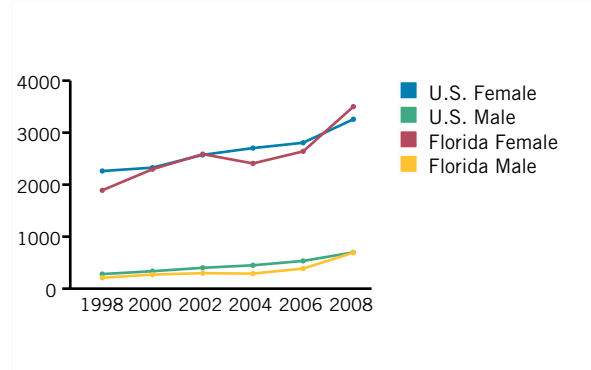
- Medicaid [2009]¹¹¹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹²¹
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹²²
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

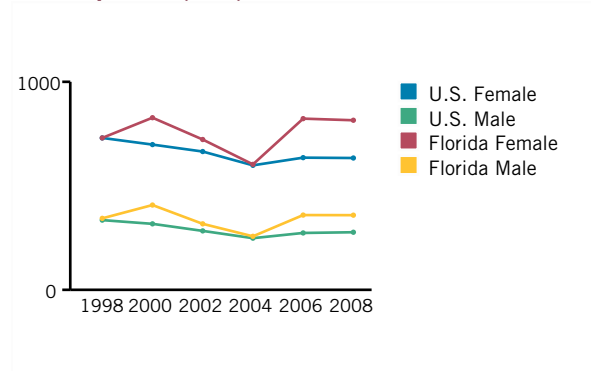
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹²³
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹²⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

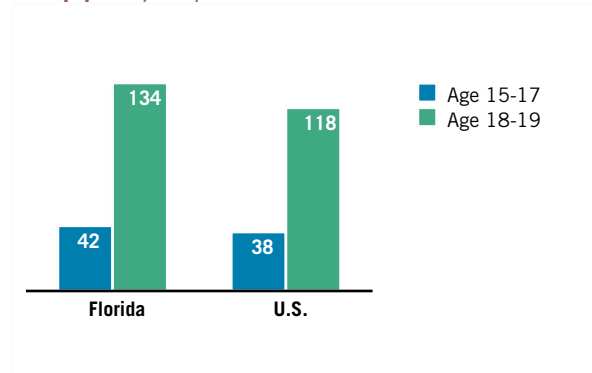
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

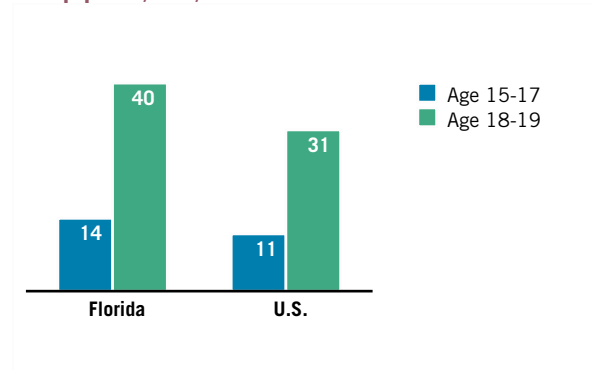
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

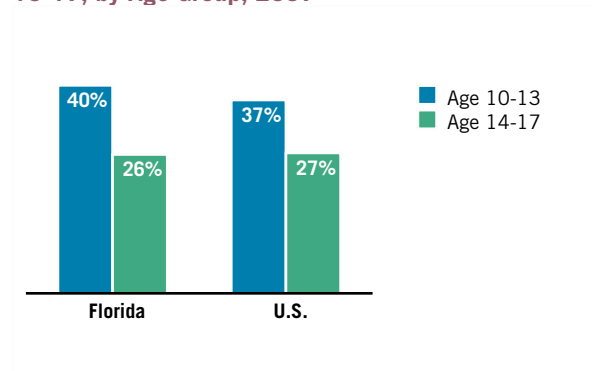
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

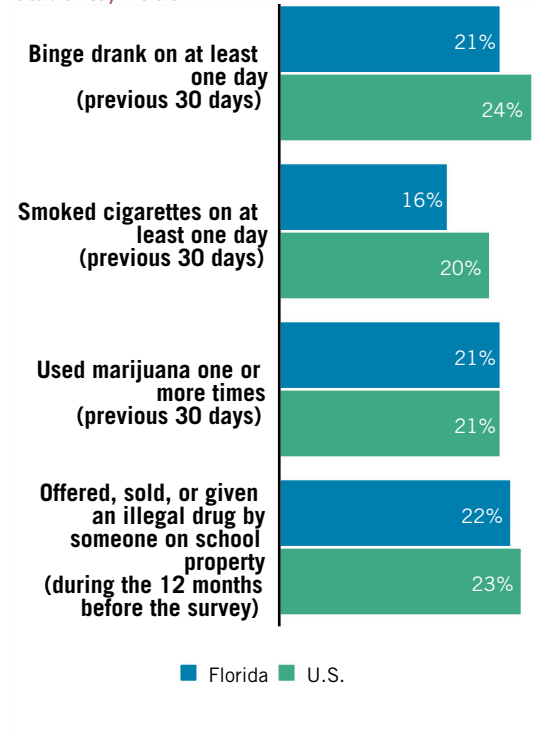
- Allow minors to consent to outpatient mental health care [2010]¹²⁵
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

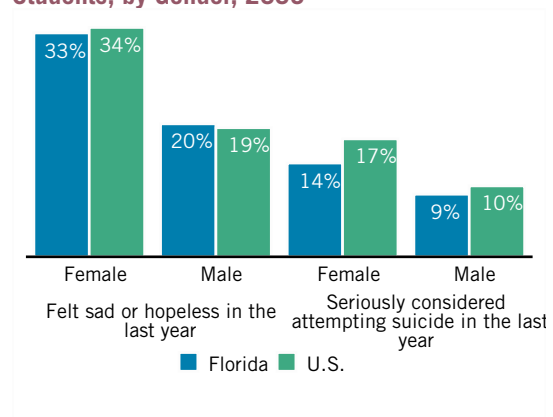
Workforce Development

- School counselors [2006]²⁵
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- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

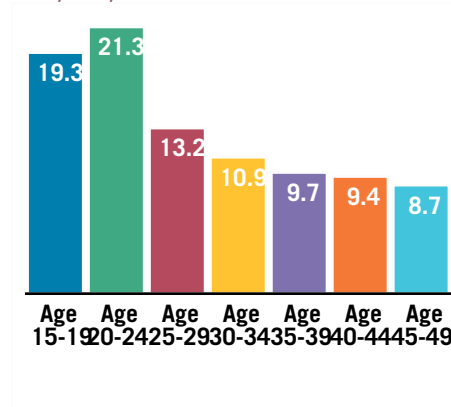
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹²⁶
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- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]¹²⁷

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹²⁸
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

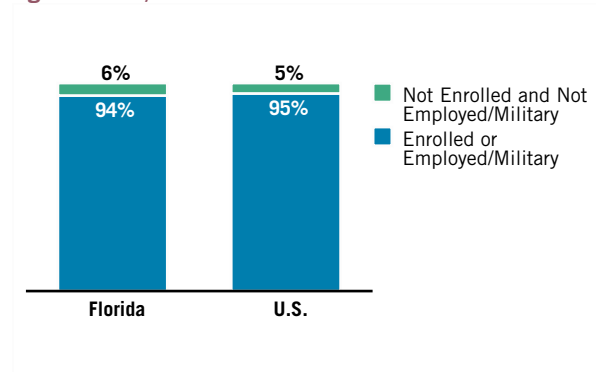
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

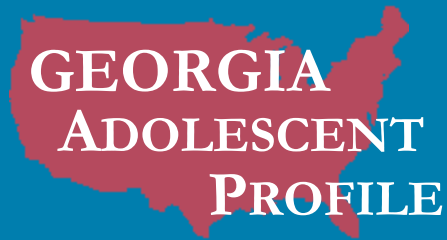
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





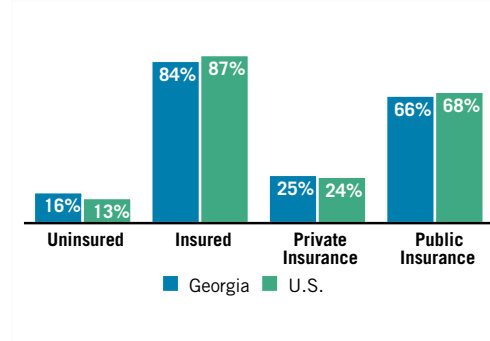
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



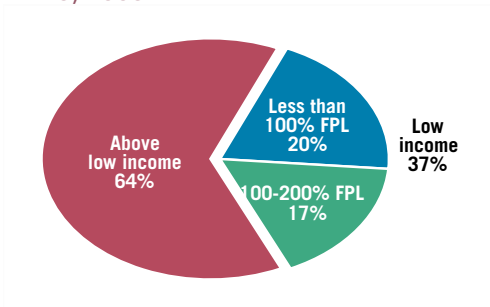
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Updated: June 1, 2011

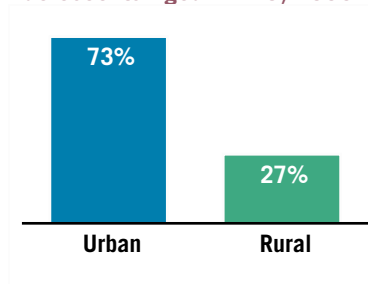
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



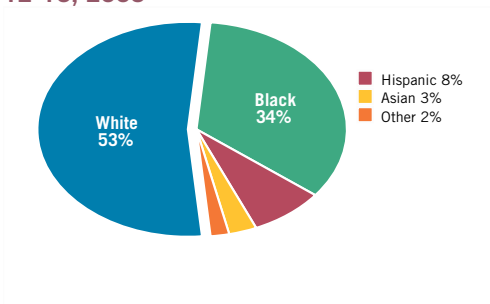
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

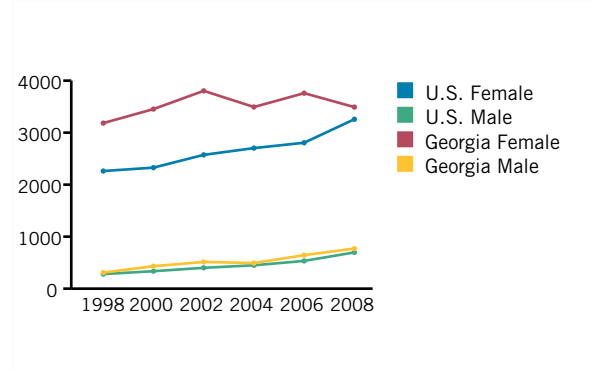
- Medicaid [2009]¹¹¹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]¹²⁹
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

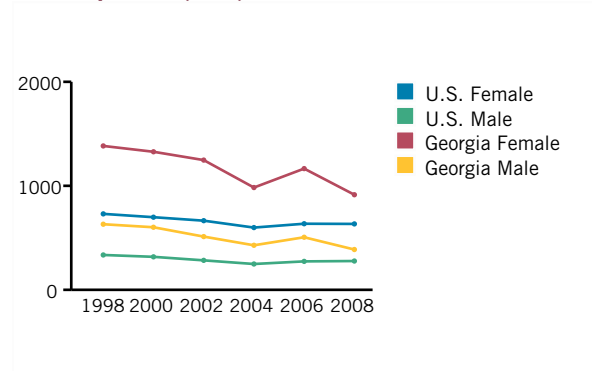
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁸¹
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

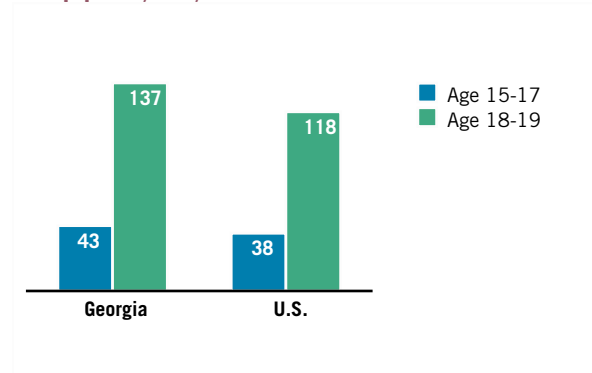
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

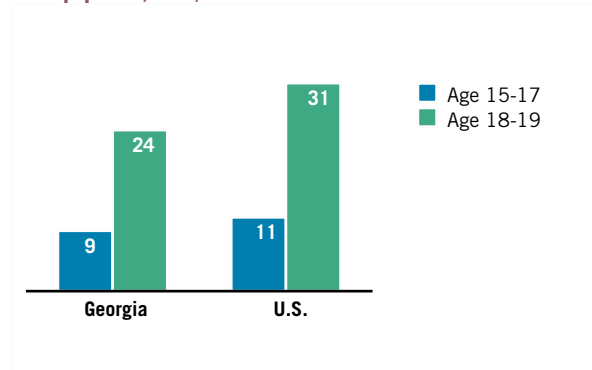
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

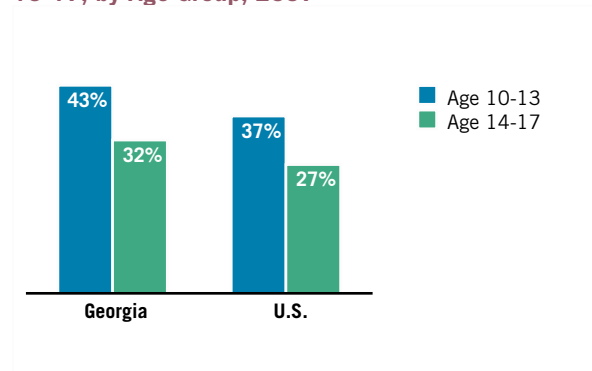
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

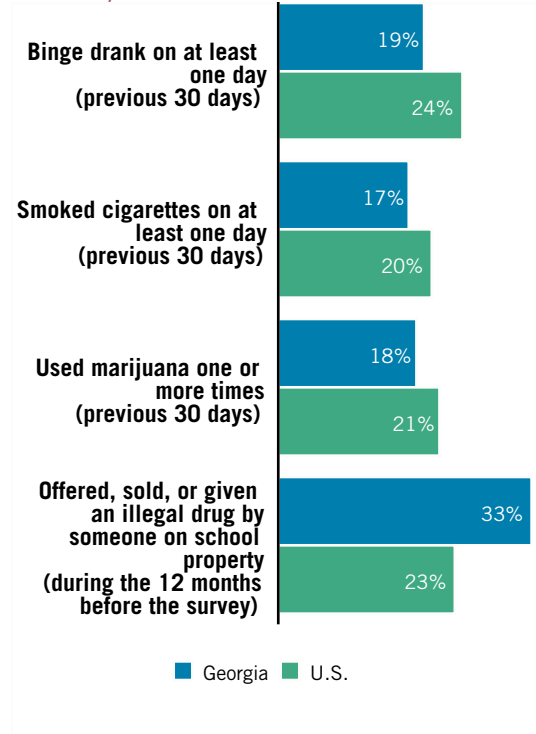
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

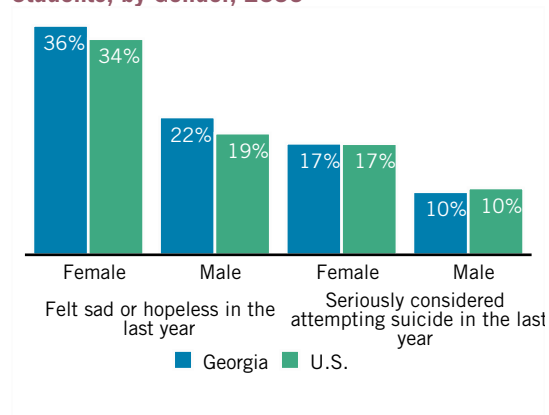
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

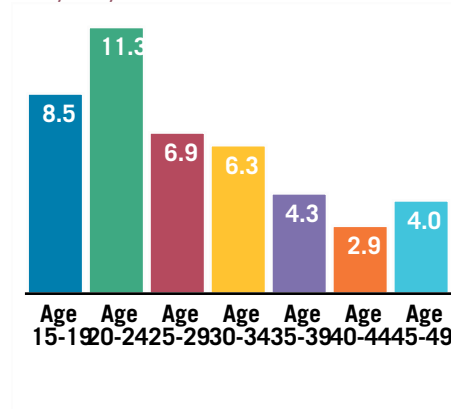
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]¹³¹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹³²
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]¹³¹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

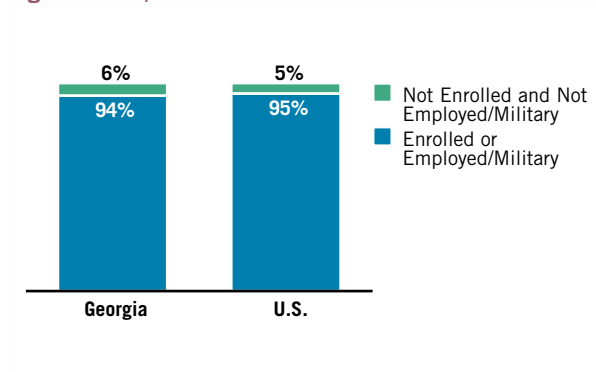
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

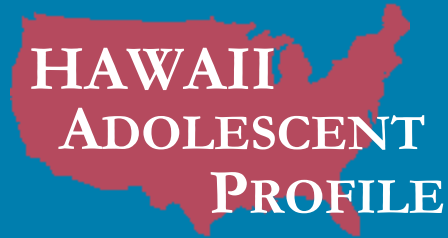
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





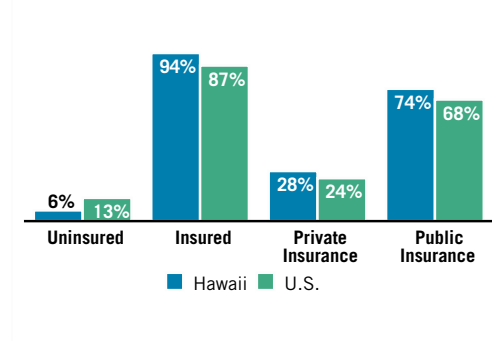
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



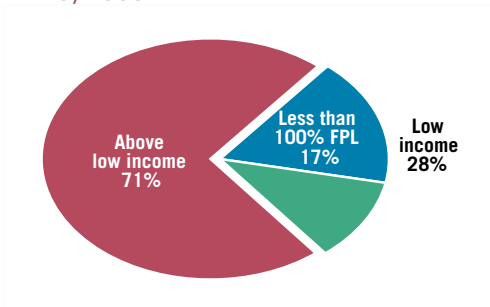
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Hawaii's 101,357 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

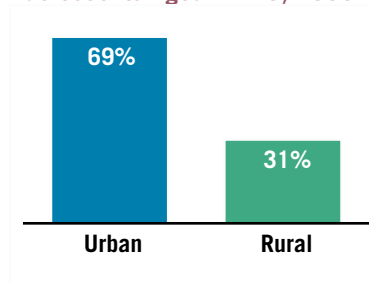
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



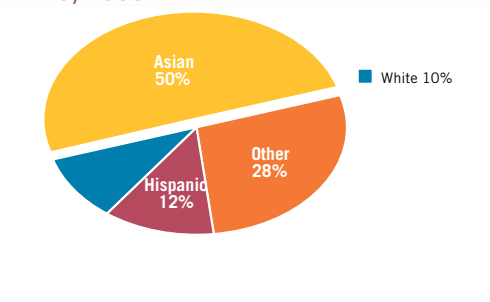
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

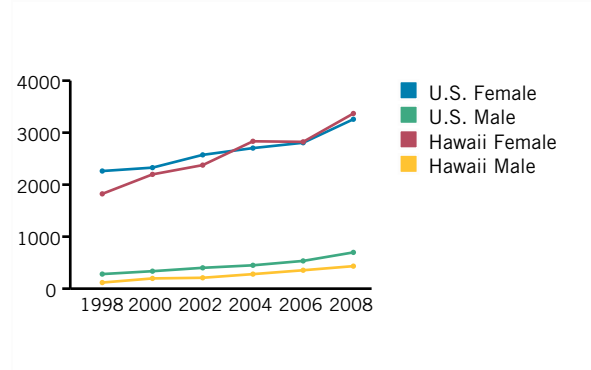
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹³³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

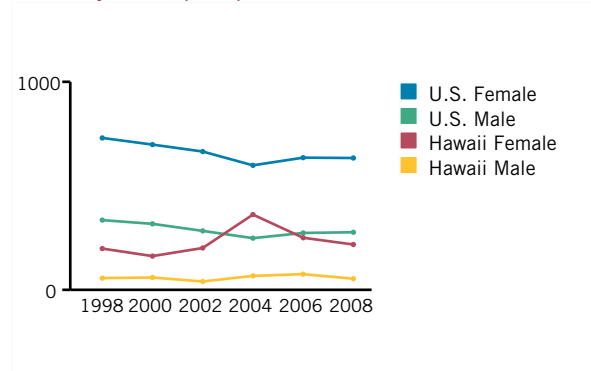
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹³⁴
- Contraceptive and family planning services [2010]¹³⁴
- HIV and STI prevention and treatment services [2010]¹³⁵
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹³⁶

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

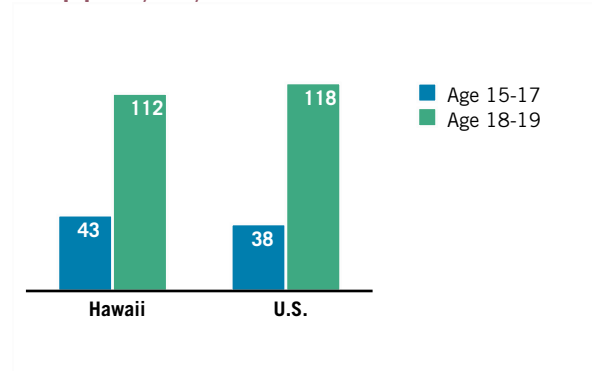
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

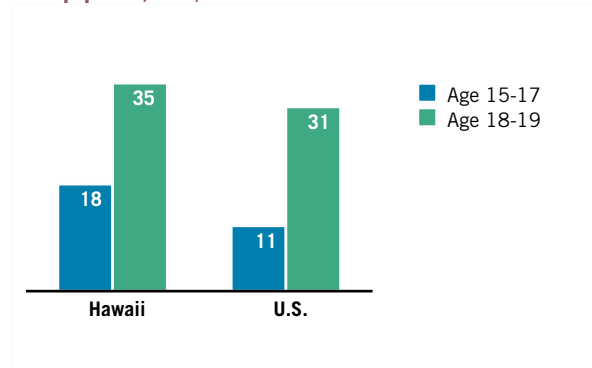
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

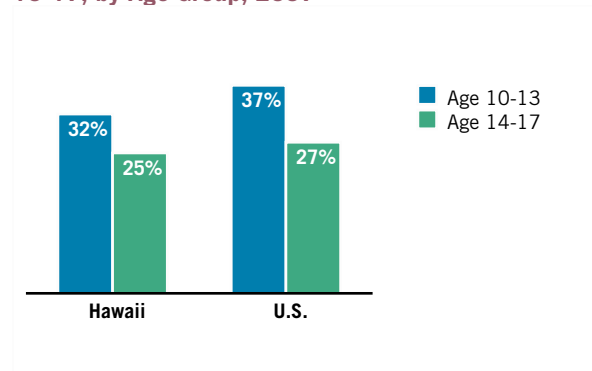
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

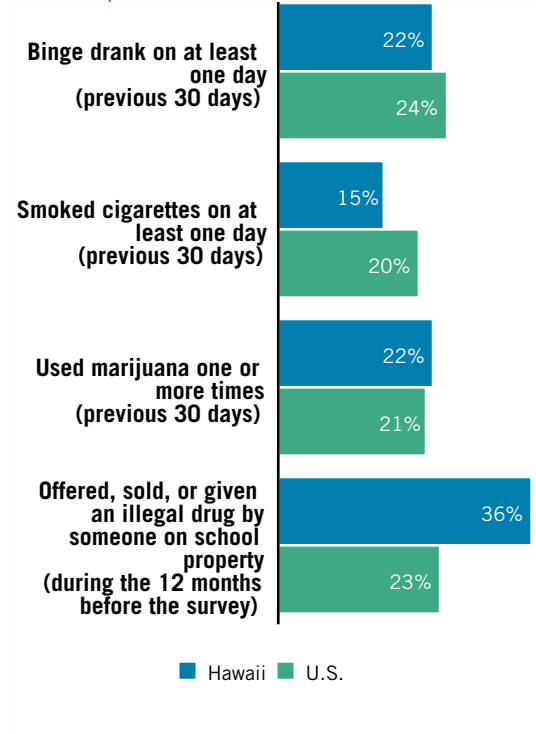
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

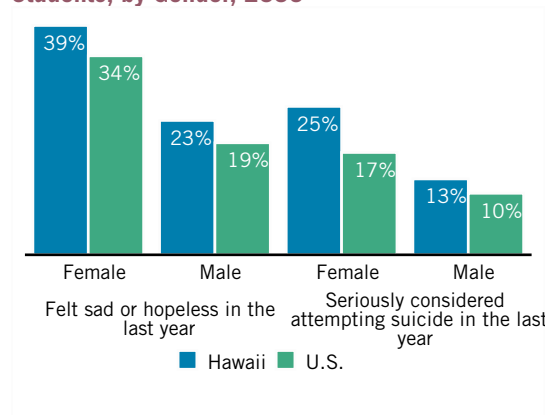
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

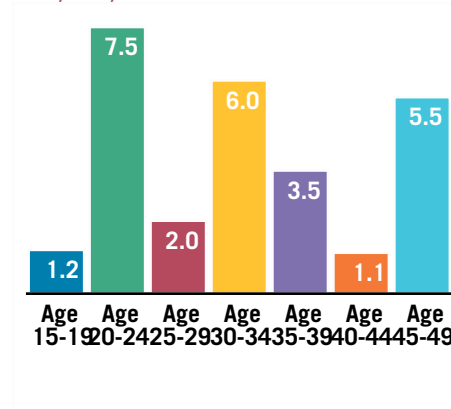
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]¹³⁸
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹³⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

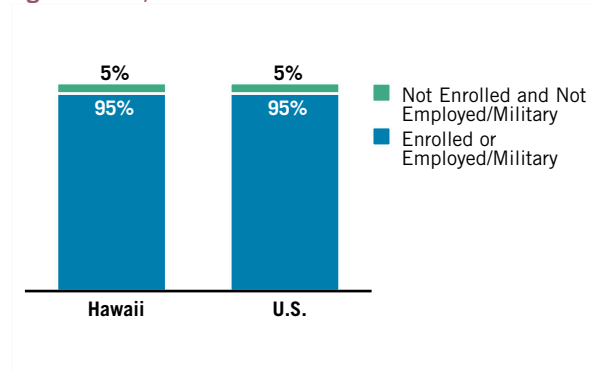
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





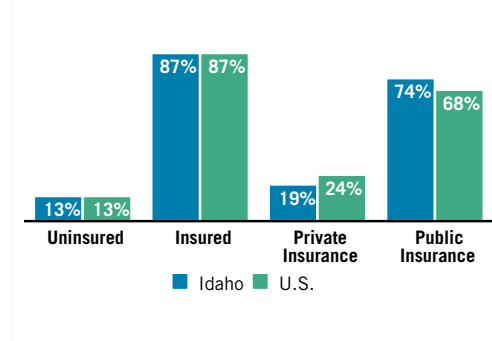
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



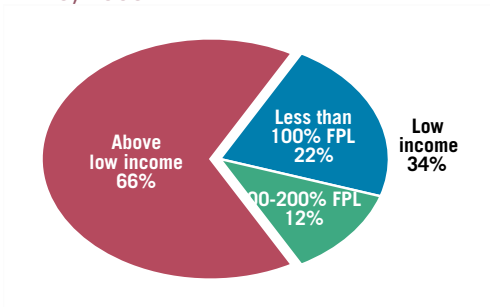
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Idaho's 151,084 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

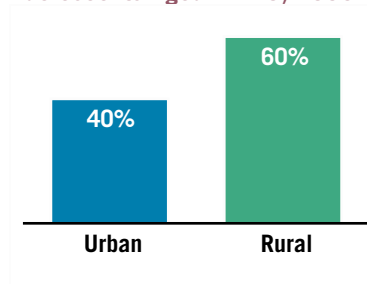
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



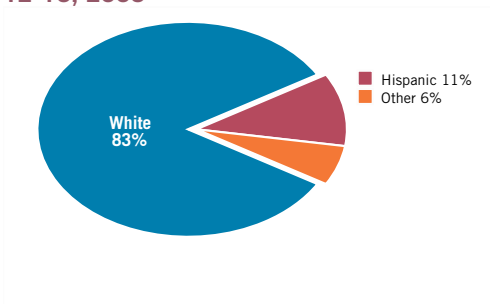
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

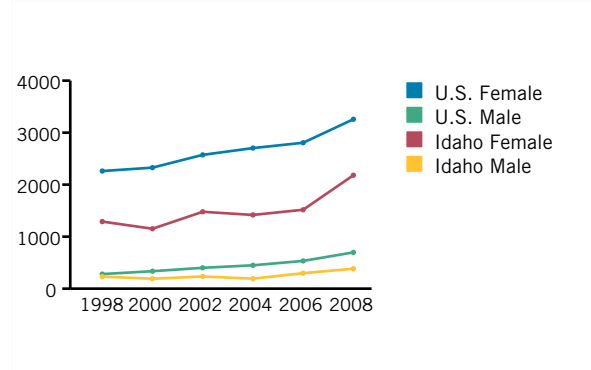
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

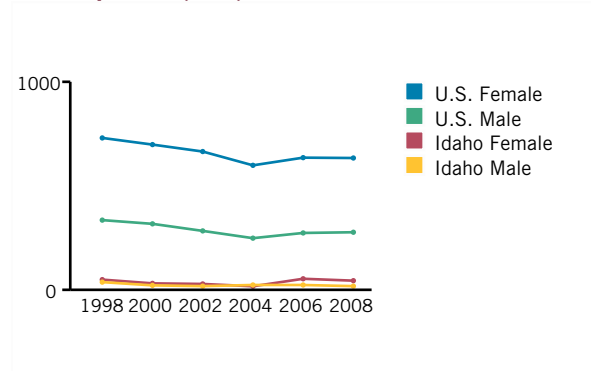
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴⁰
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁴¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

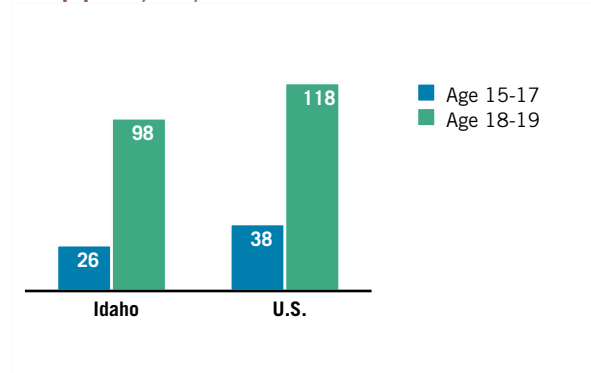
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

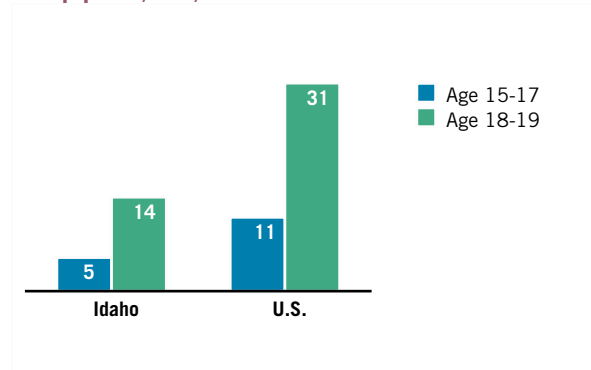
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

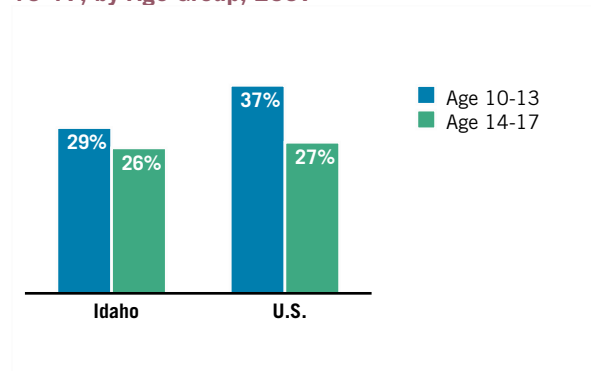
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

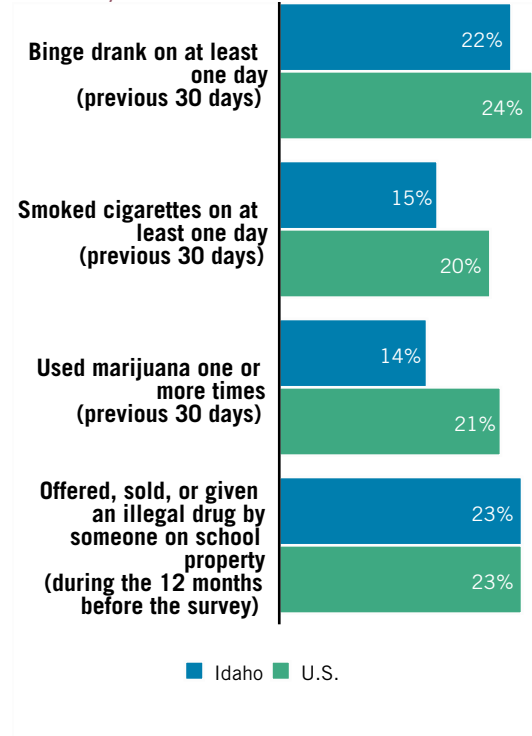
- Allow minors to consent to outpatient mental health care [2010]⁸²
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

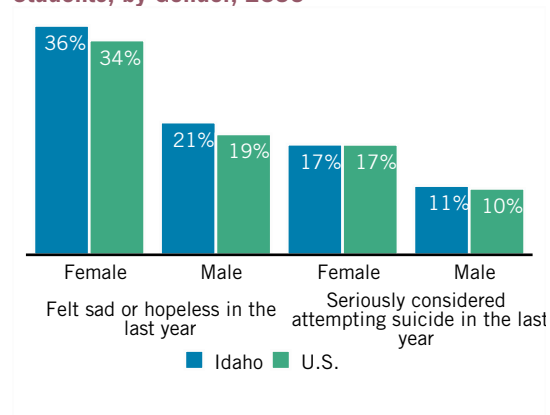
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

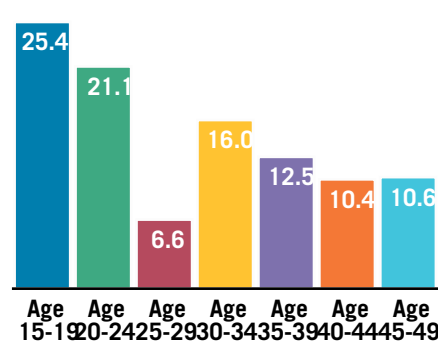
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹⁴²
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]¹⁴³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]¹⁴⁴

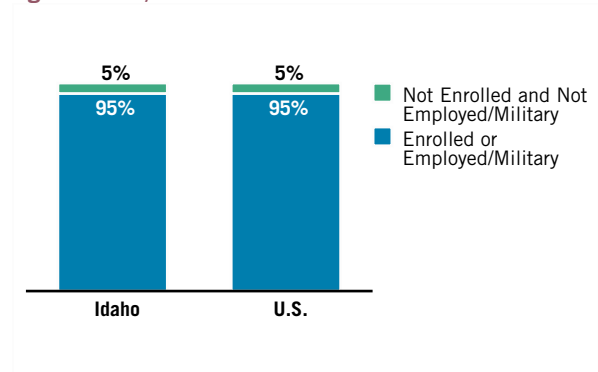
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

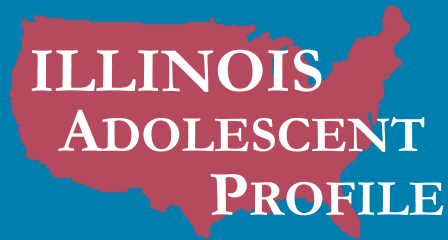
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





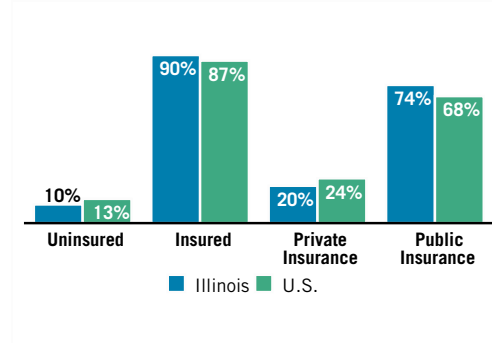
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



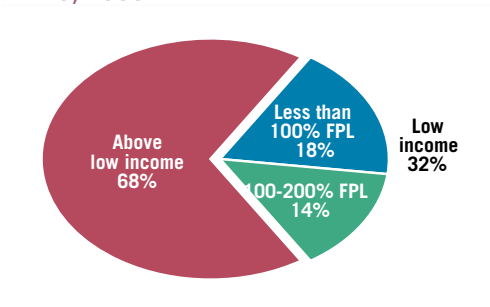
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Illinois's 1,203,347 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

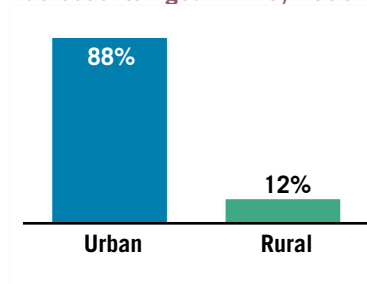
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



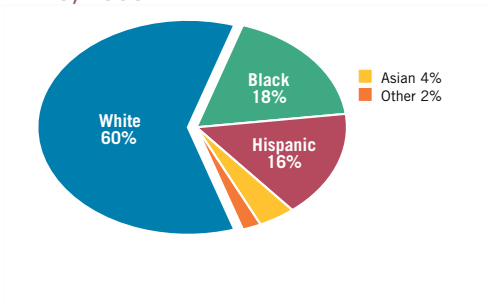
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

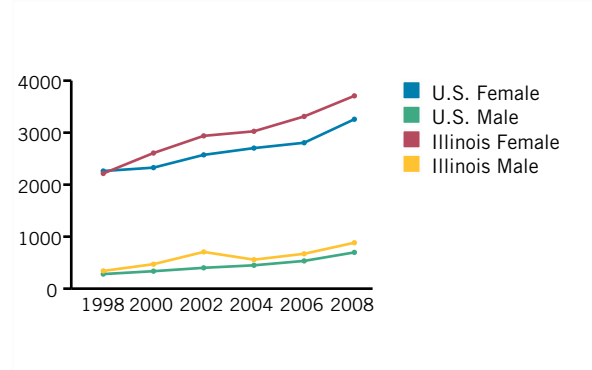
- Medicaid [2009]¹¹¹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹⁴⁵
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- ☑ Require physical activity and fitness taught in schools [2006]⁵¹

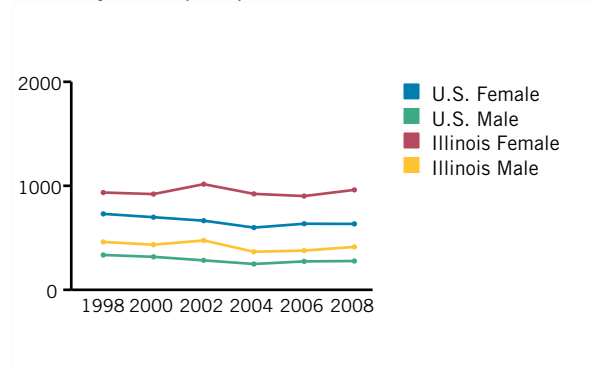
Services in Schools

- ☑ Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - ☑ Medicaid [2008]¹¹
 - ☑ CHIP [2008]¹¹
- ☑ Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴⁶
- HIV and STI prevention and treatment services [2010]¹⁴⁷
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁴⁸

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

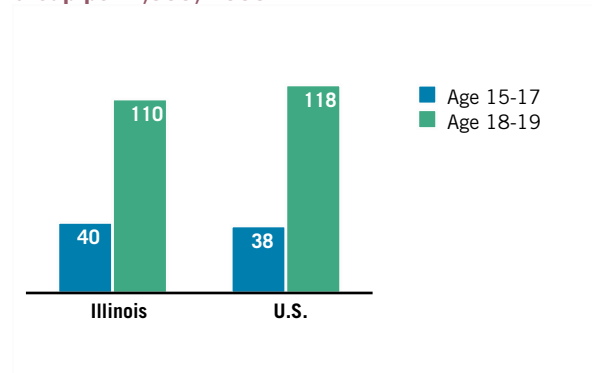
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

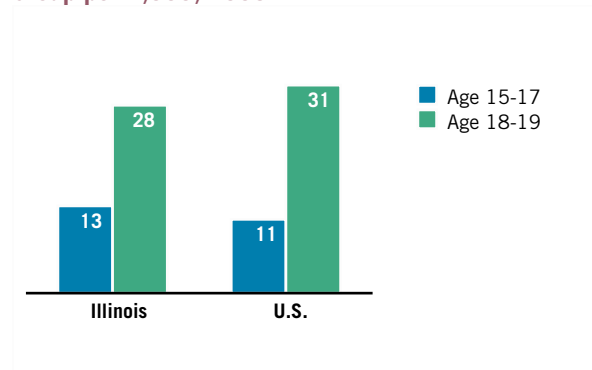
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

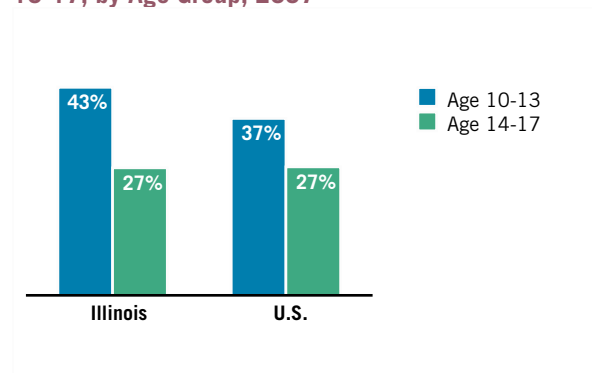
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²²

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

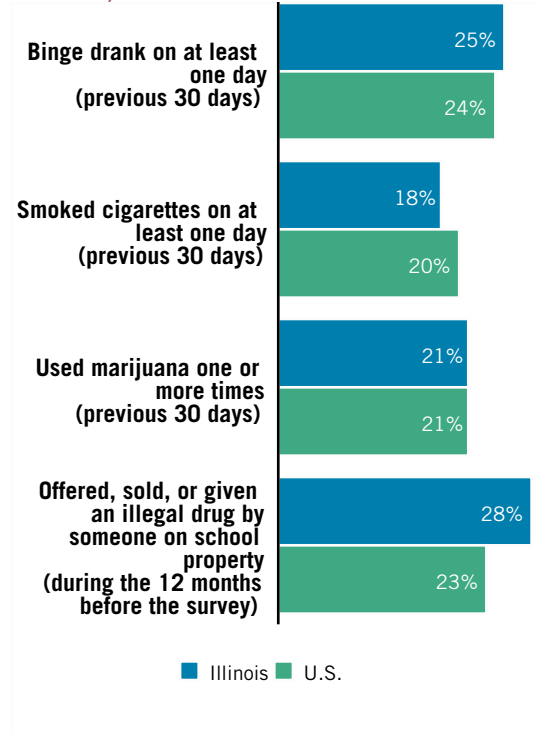
- Allow minors to consent to outpatient mental health care [2010]¹⁴⁹
- Allow minors to consent to care for drug or alcohol abuse [2010]⁷⁷

State Choices to Promote Quality

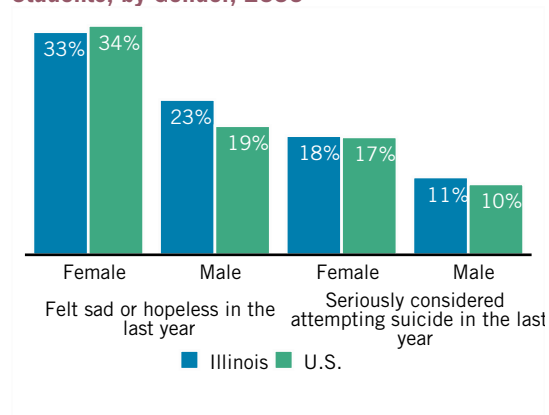
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]¹⁵⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]¹⁵¹

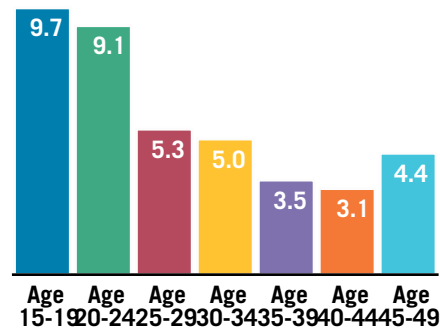
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]¹⁵²
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]¹⁵¹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

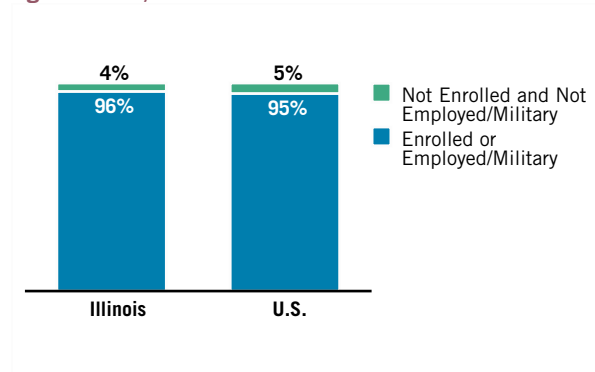
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

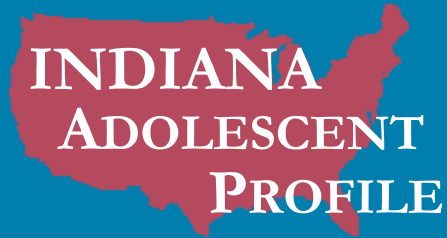
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





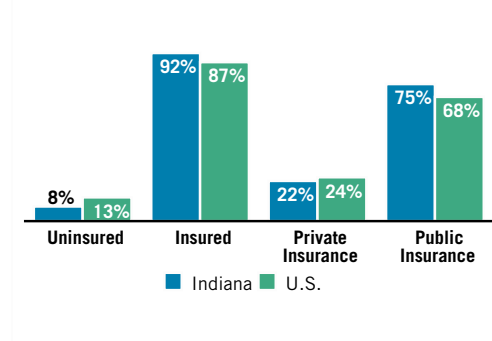
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



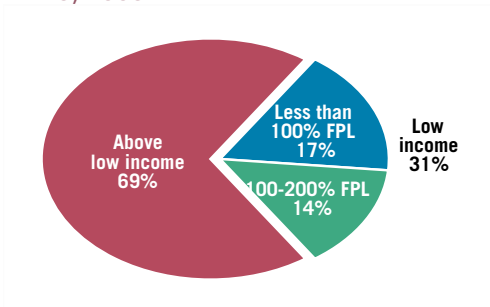
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Indiana's 595,573 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

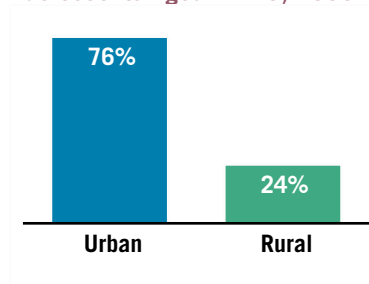
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



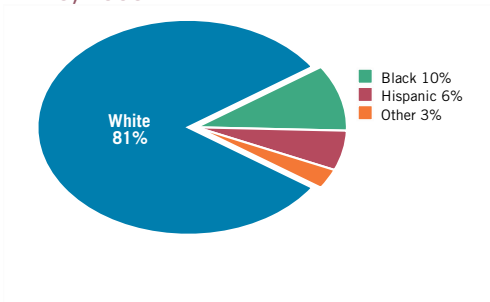
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

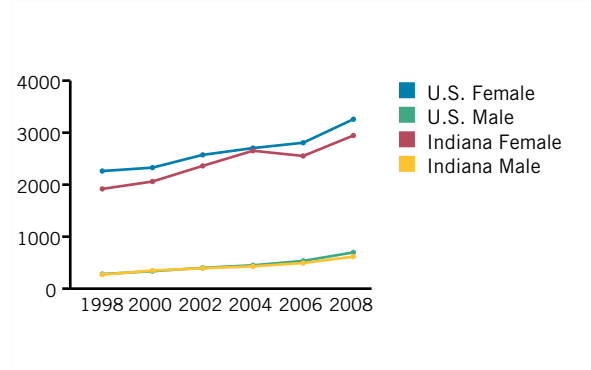
- Medicaid [2009]¹⁵³
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹⁵⁴
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹⁵⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

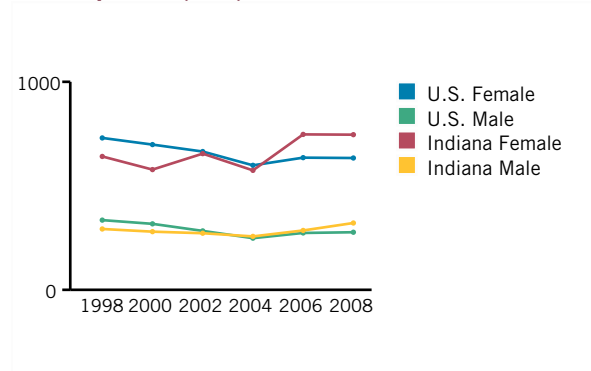
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁵⁷
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵⁸
- 4 Screenings for children 15-18 years [2009]¹⁵⁸
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]⁹⁷
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]¹⁵⁹
- Specify time requirements for physical education [2006]²¹

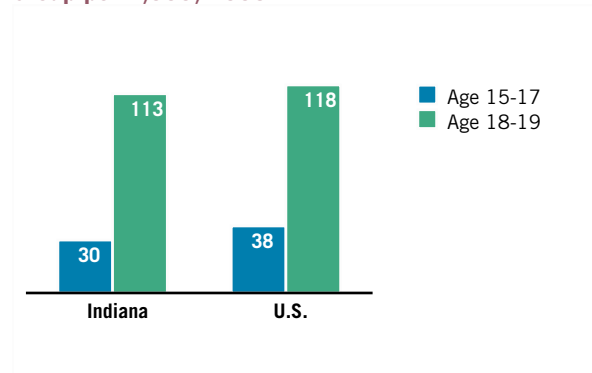
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

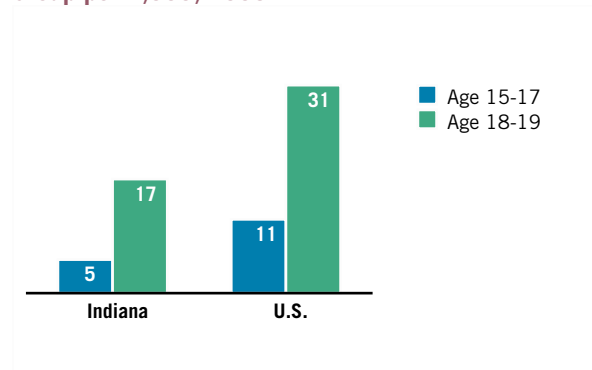
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

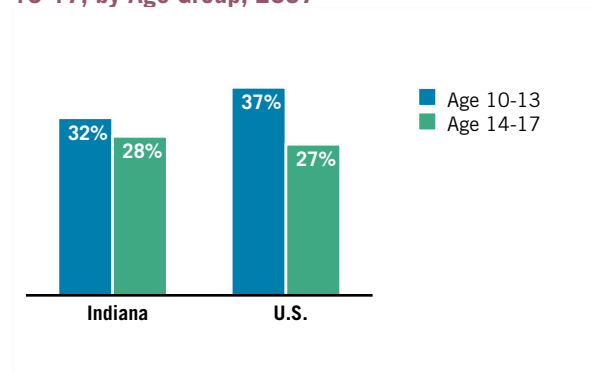
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]¹⁶⁰

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

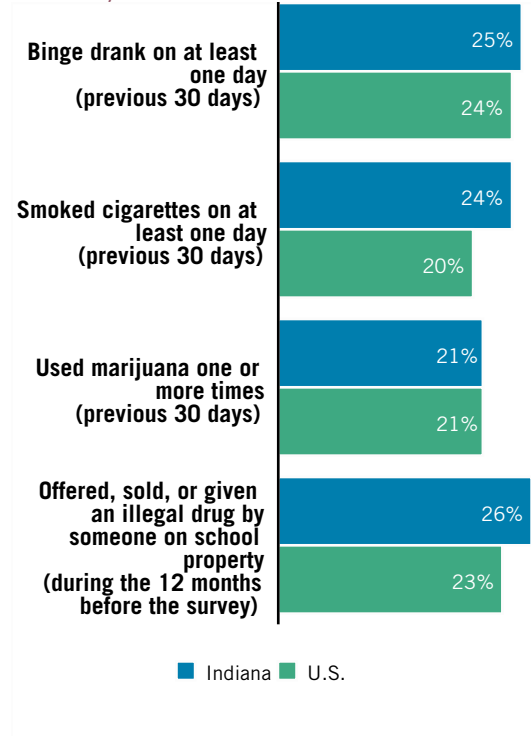
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]¹⁶¹

State Choices to Promote Quality

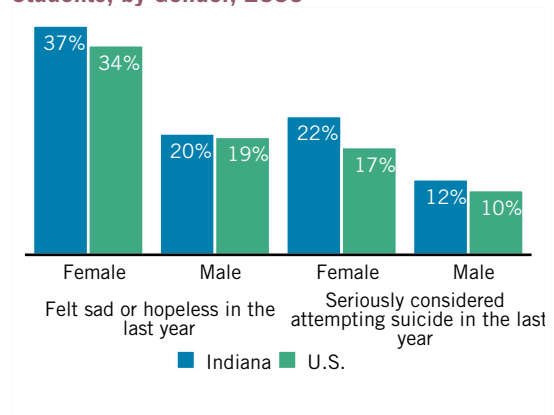
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

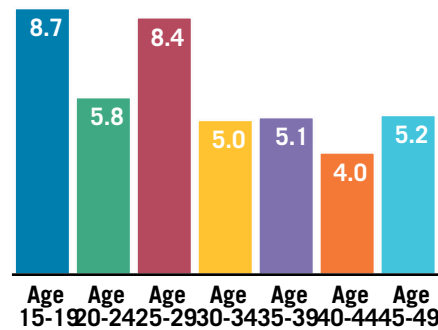
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]¹⁶²
 - Restrict underage passengers to 1 or 2 [2010]¹⁶³
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]¹⁶⁴
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

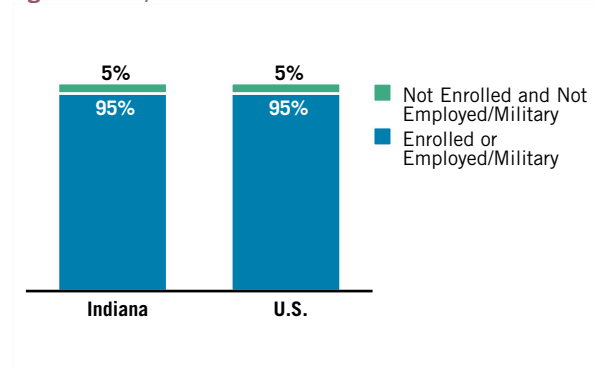
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

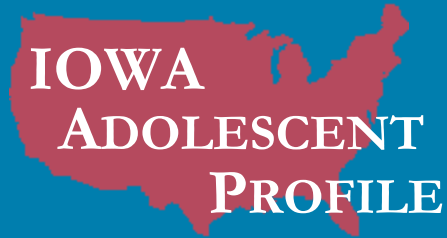
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





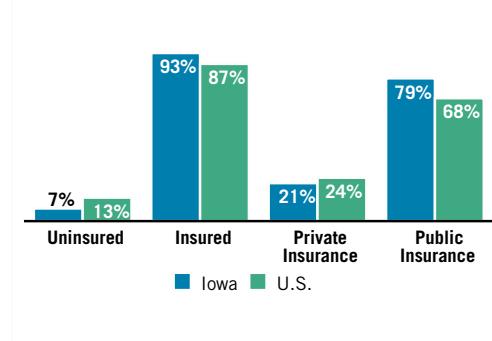
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



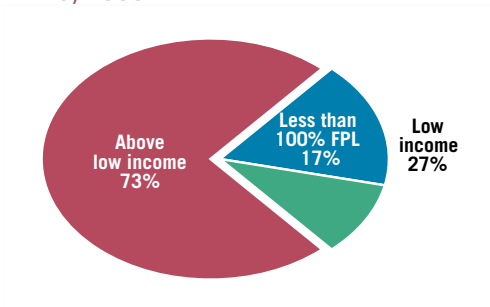
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Updated: June 1, 2011

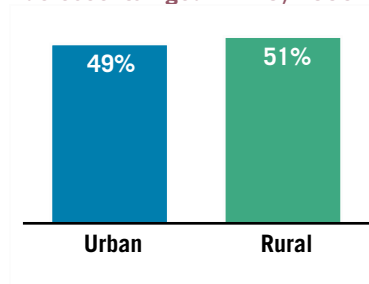
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



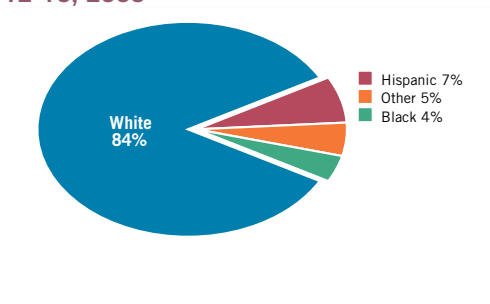
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

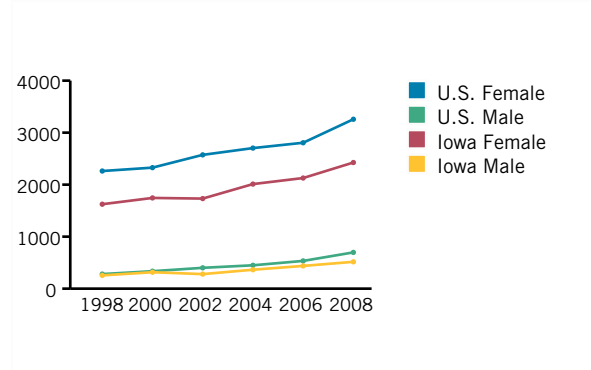
- Medicaid [2009]¹⁶⁵
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

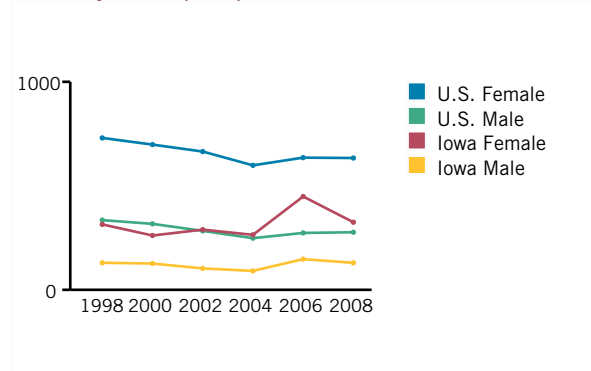
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁶⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

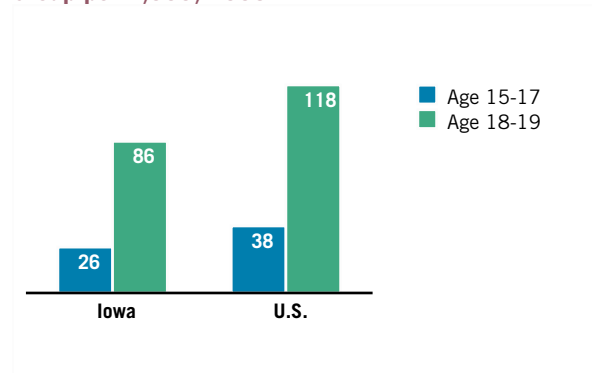
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

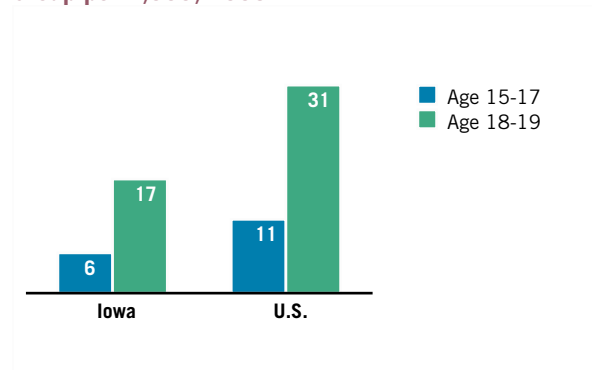
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

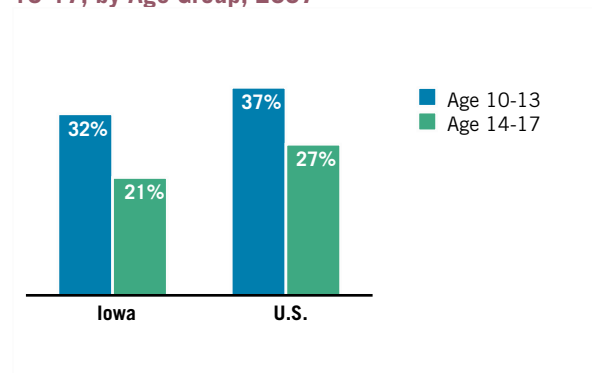
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

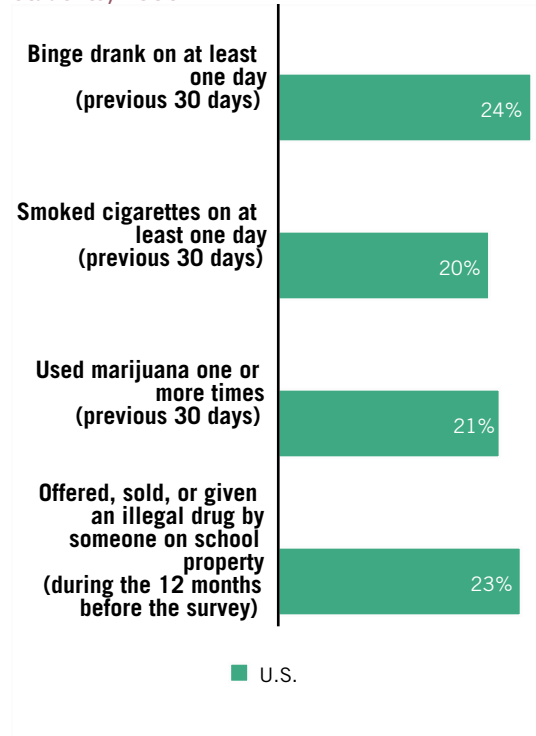
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

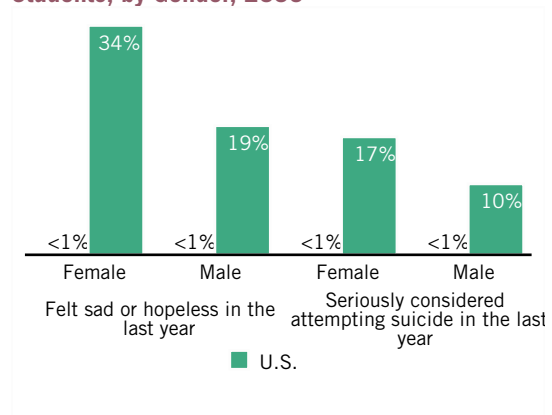
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

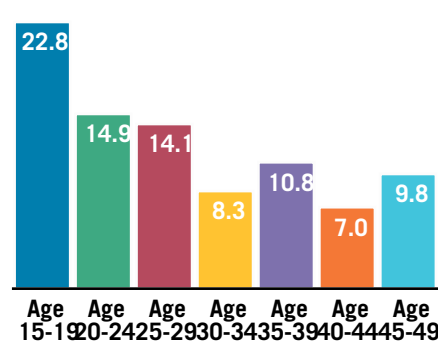
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁶⁸
- Ban texting while driving for adolescent novice drivers [2010]¹⁶⁹
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹²⁸
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

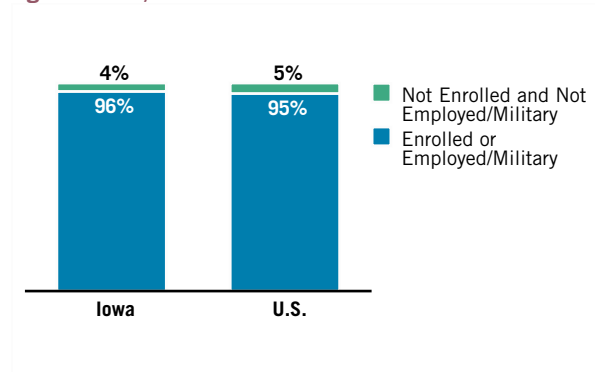
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁷¹
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

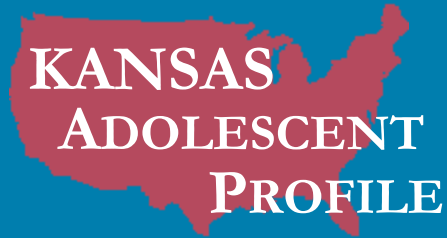
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





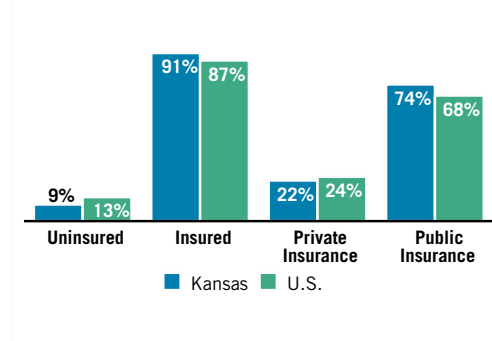
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



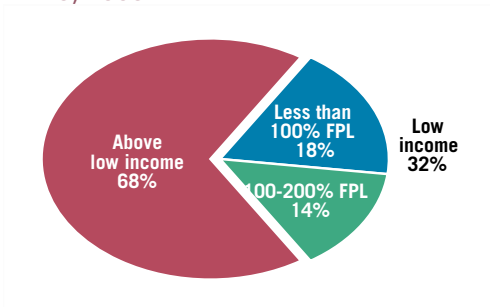
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Kansas's 258,339 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

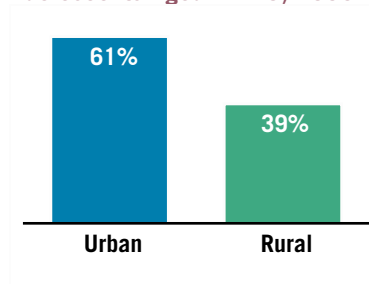
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



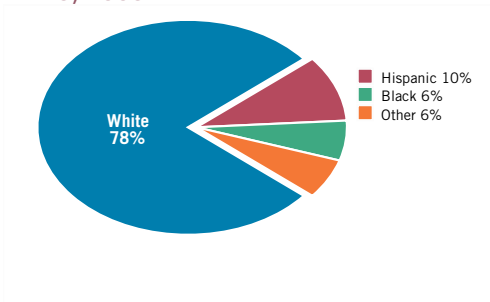
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

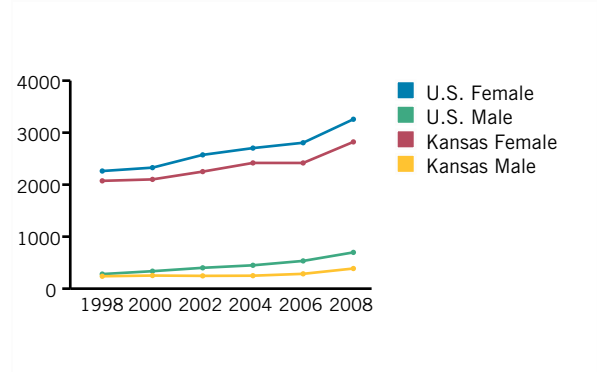
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

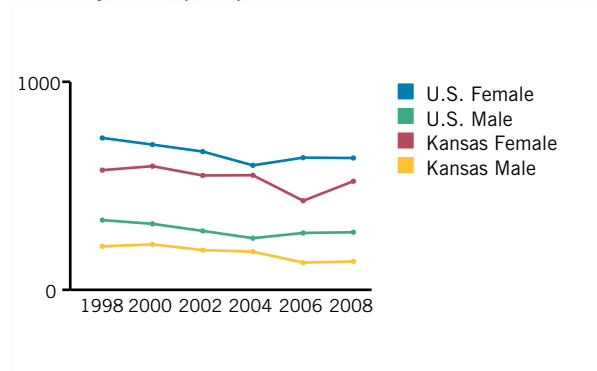
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁷⁰
- Contraceptive and family planning services [2010]¹⁷¹
- HIV and STI prevention and treatment services [2010]⁸¹
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁷²

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

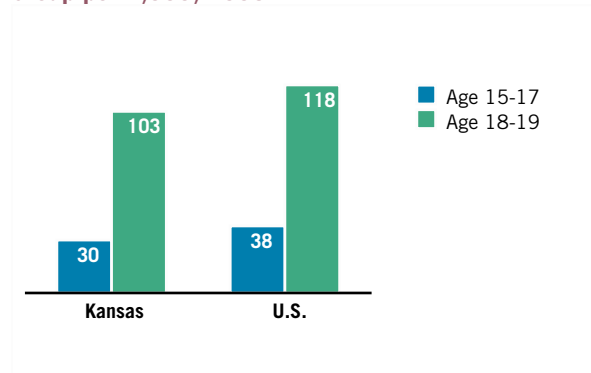
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

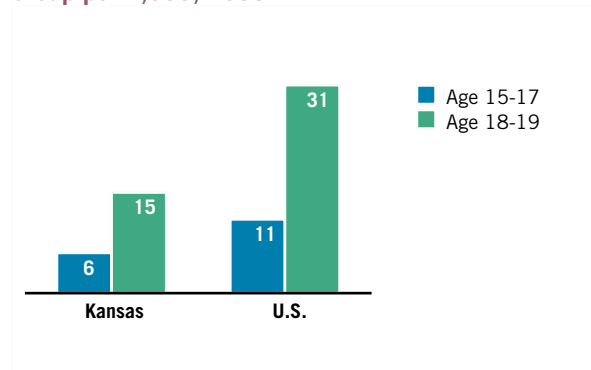
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

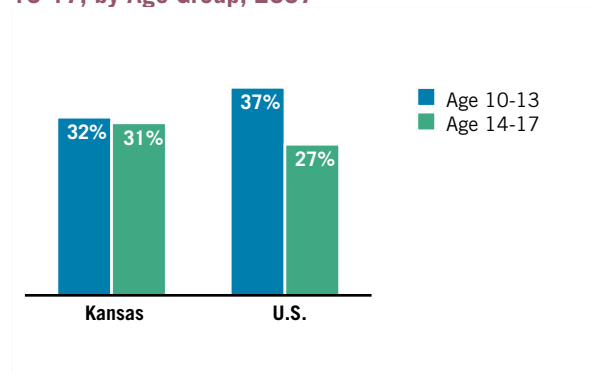
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

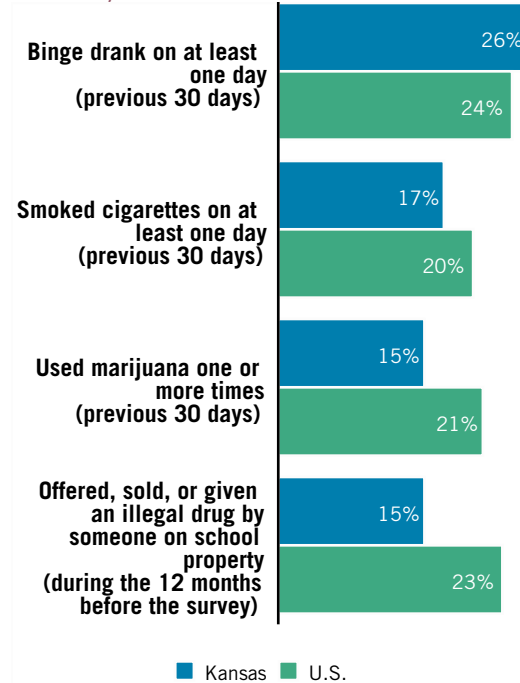
- Allow minors to consent to outpatient mental health care [2010]¹⁷³
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

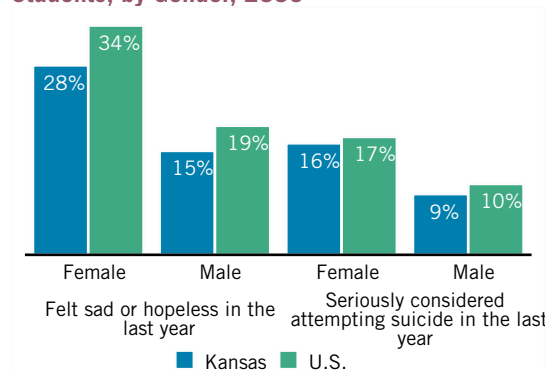
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

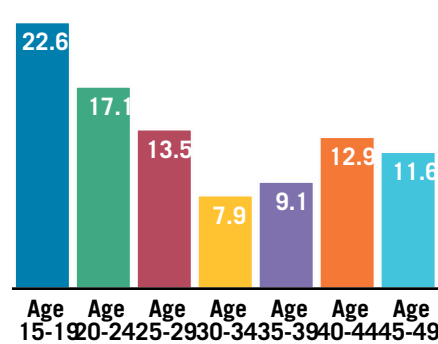
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁷⁴
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]¹⁷⁵
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

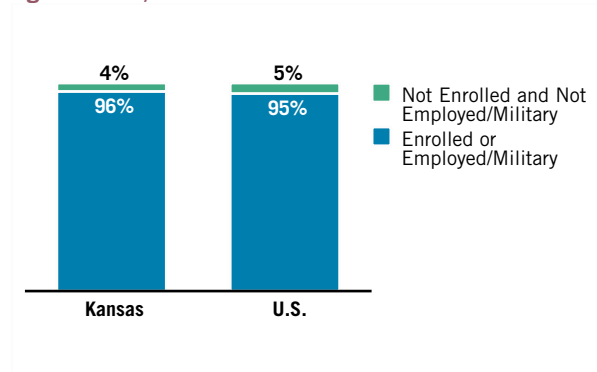
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





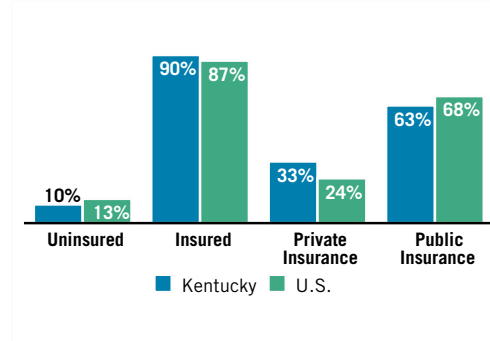
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



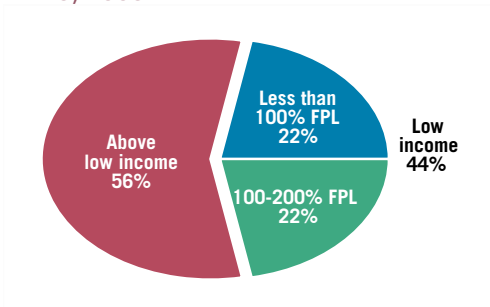
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Kentucky's 372,962 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

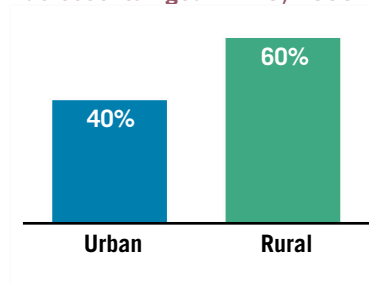
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



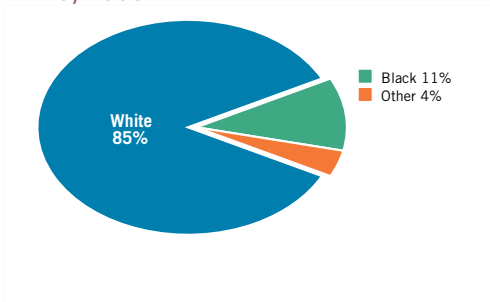
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

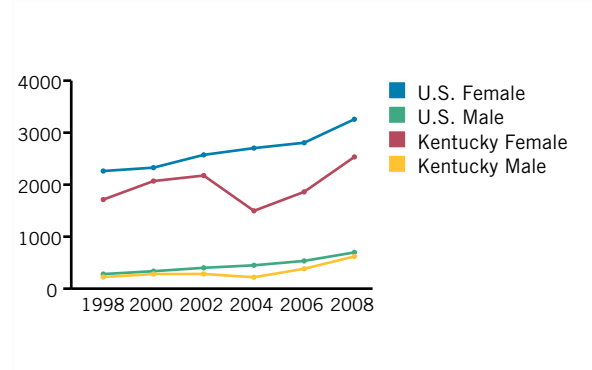
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

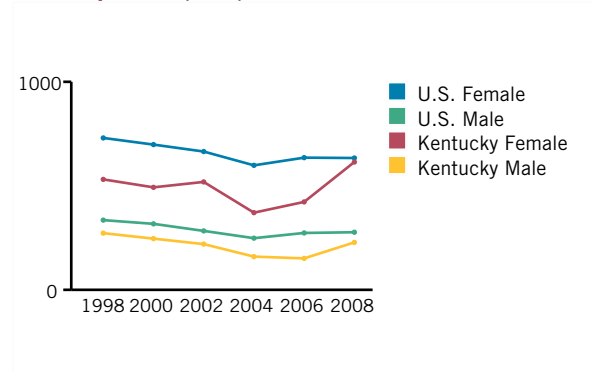
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁷⁶
- Contraceptive and family planning services [2010]¹⁷⁶
- HIV and STI prevention and treatment services [2010]¹⁷⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

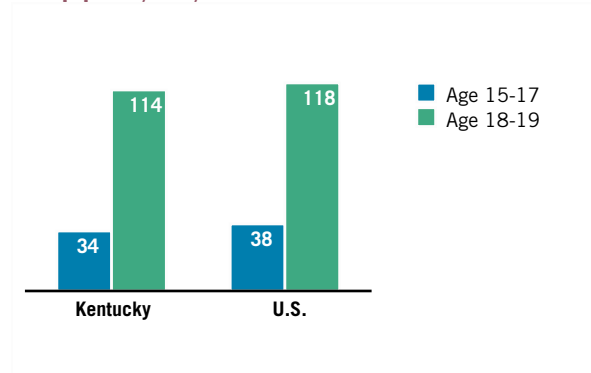
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

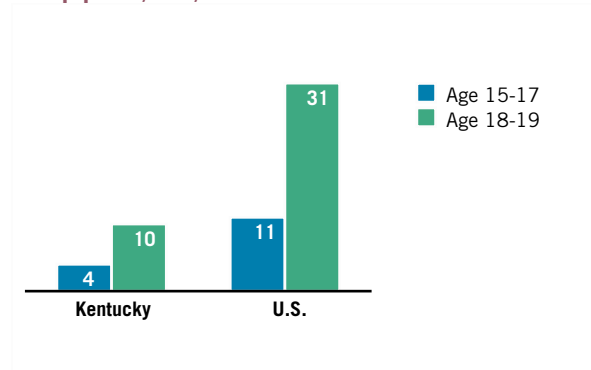
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

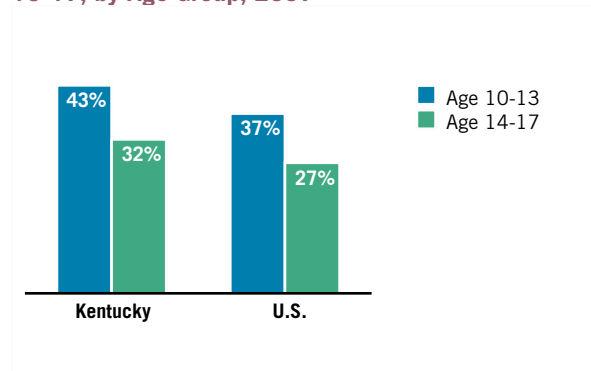
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

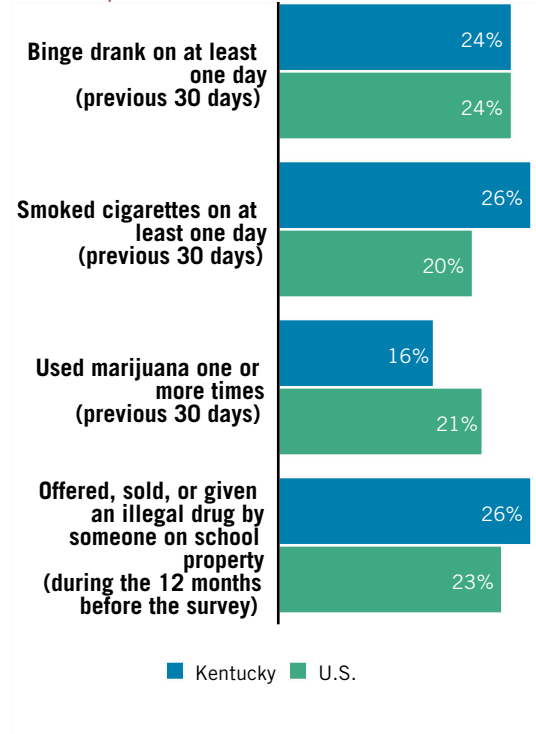
- Allow minors to consent to outpatient mental health care [2010]¹⁷⁷
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

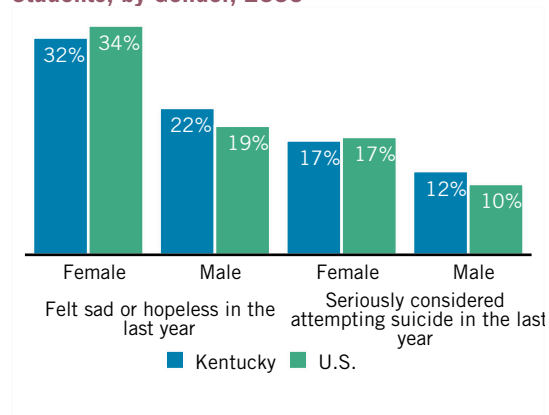
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

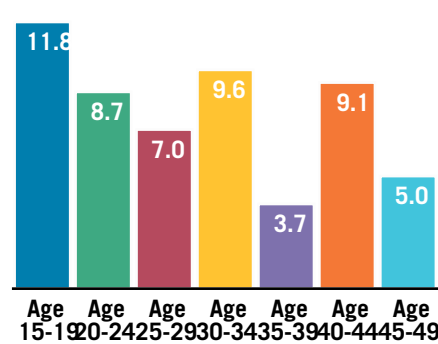
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

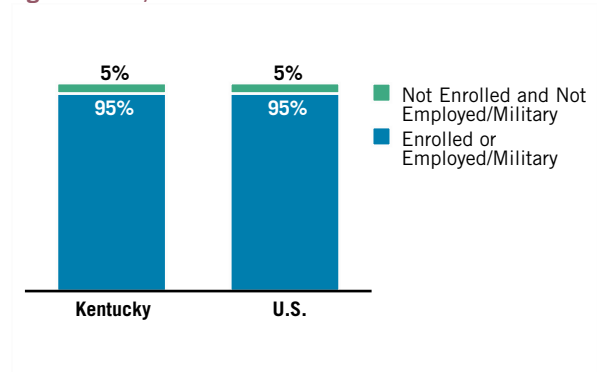
YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]¹⁷⁸
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]¹⁷⁹

Transition to Adulthood

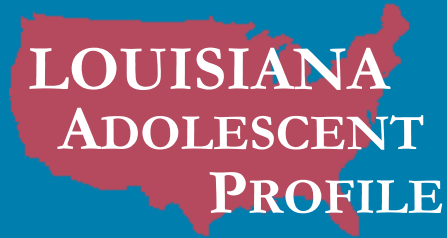
- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴



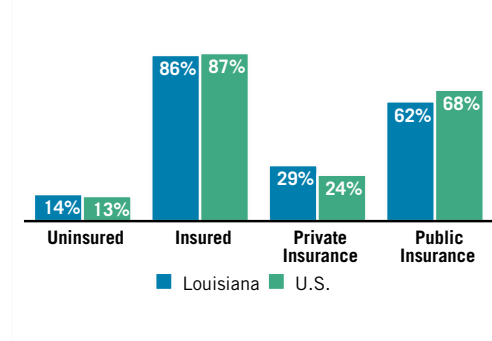
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



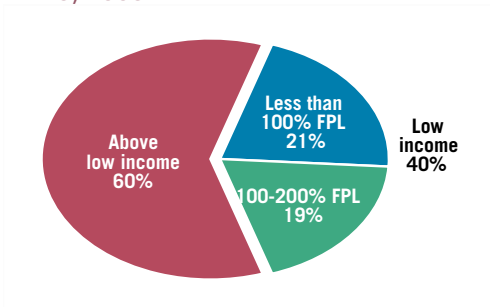
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Louisiana's 420,087 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

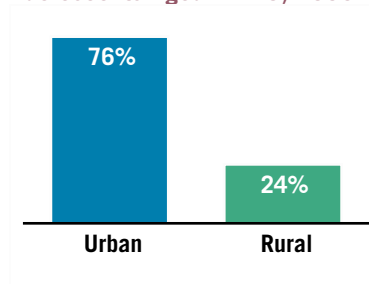
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



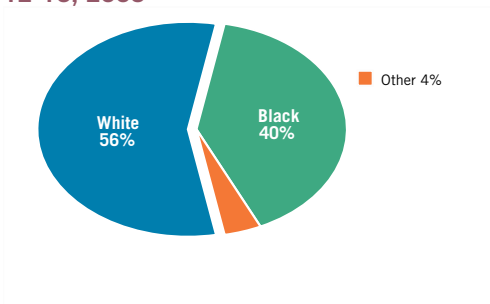
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

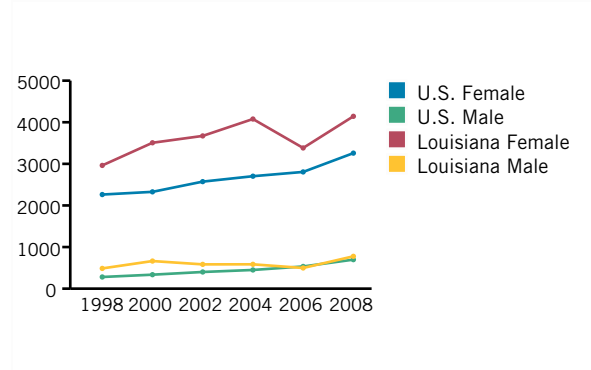
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹⁸⁰
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]¹⁸¹
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁹²

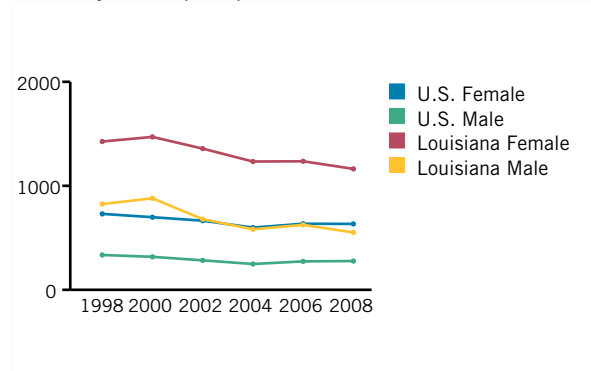
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁷⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]¹⁸²

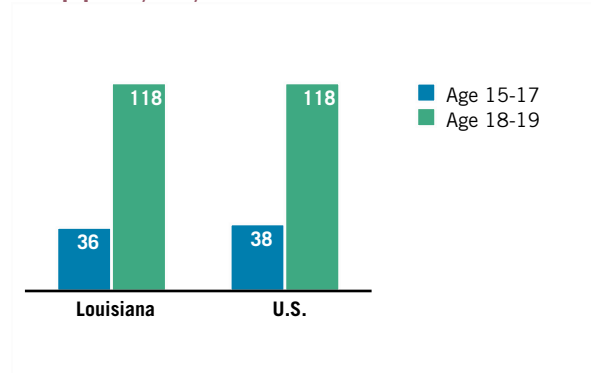
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

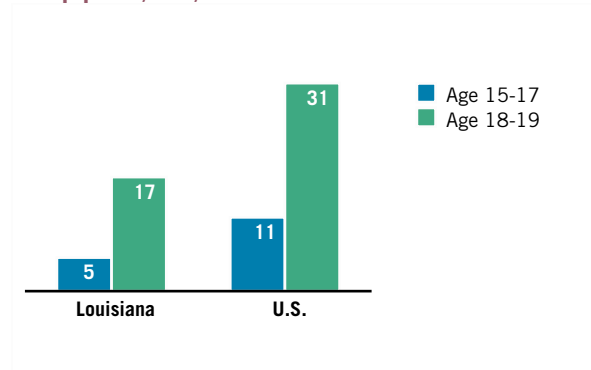
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

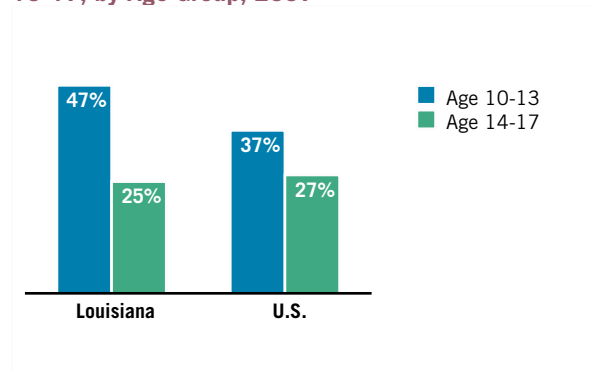
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

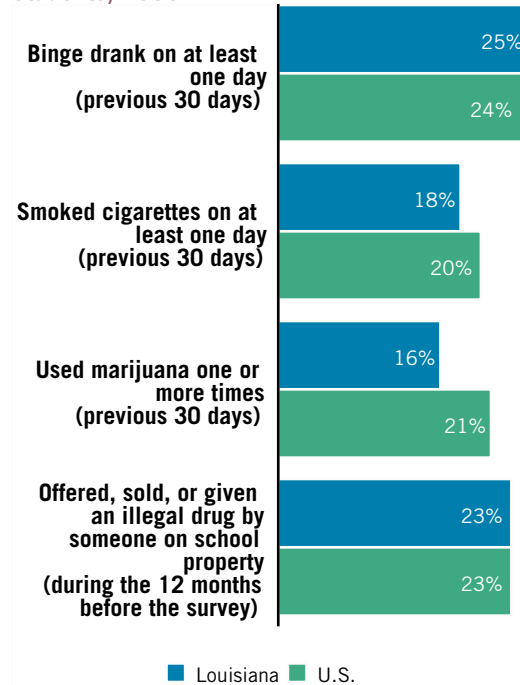
- Allow minors to consent to outpatient mental health care [2010]⁸²
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

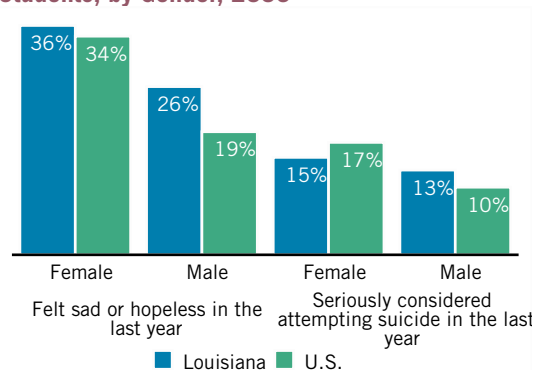
Workforce Development

- School counselors [2006]¹⁸³
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

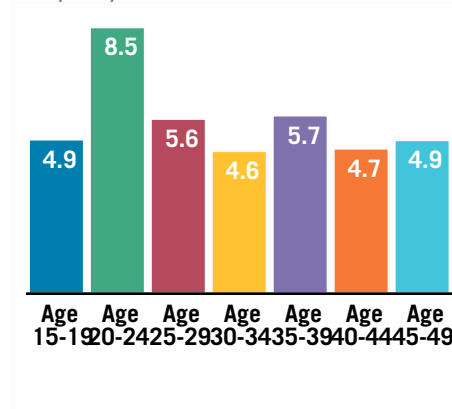
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]¹⁸⁴

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]¹⁸⁵
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]¹⁸⁶
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

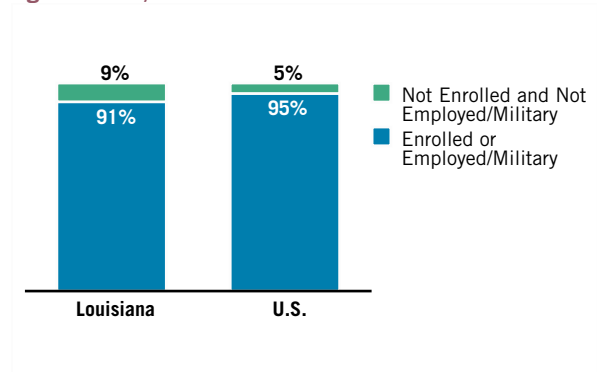
YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴



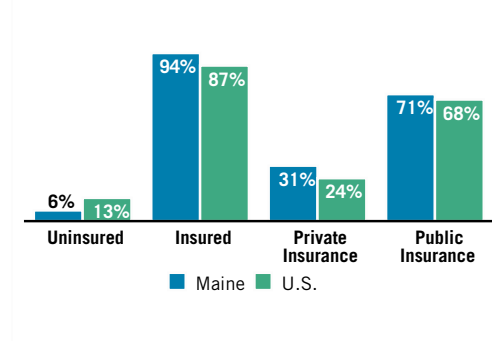
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



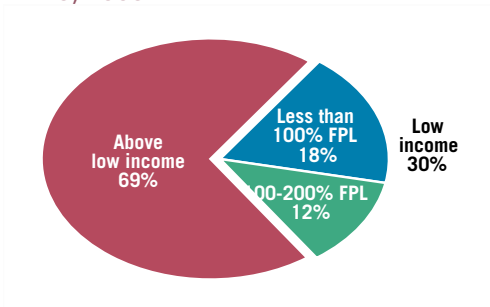
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Updated: June 1, 2011

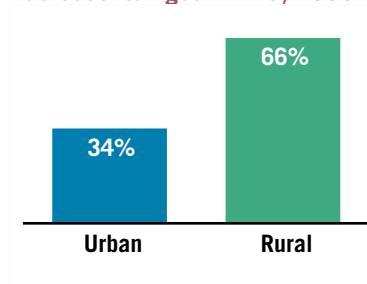
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



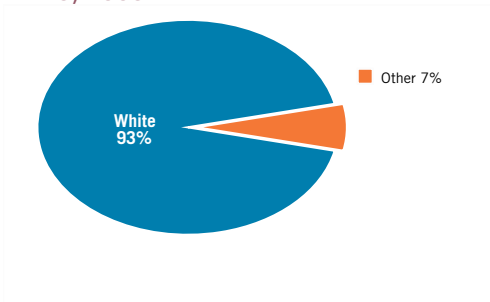
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

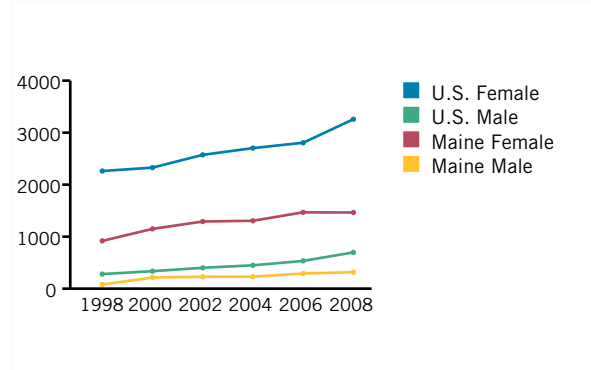
- Medicaid [2009]¹⁵³
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
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- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁹²
 - STI prevention education [2006]⁹²
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- Require physical activity and fitness taught in schools [2006]⁹²

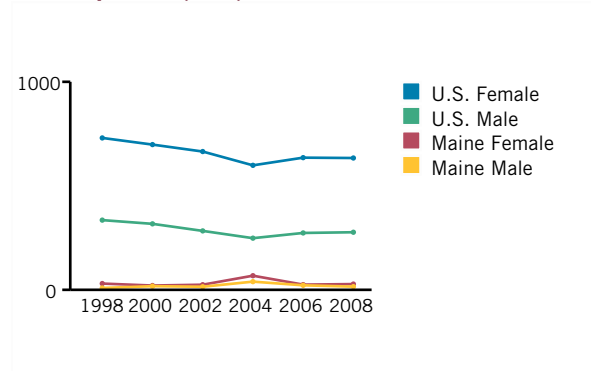
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
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 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁸⁷
- Contraceptive and family planning services [2010]¹⁸⁸
- HIV and STI prevention and treatment services [2010]¹⁷⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁸⁹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
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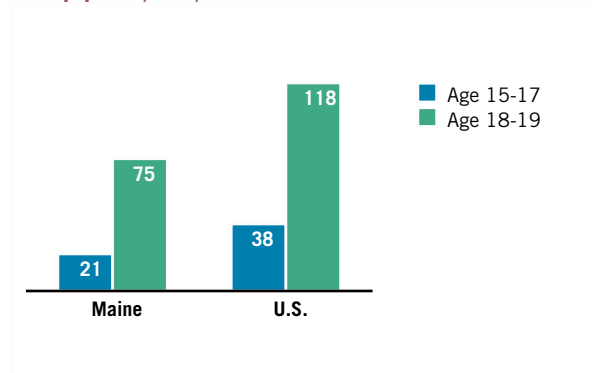
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹⁹⁰

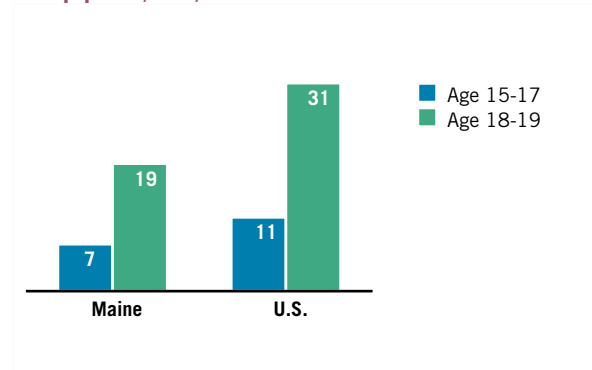
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

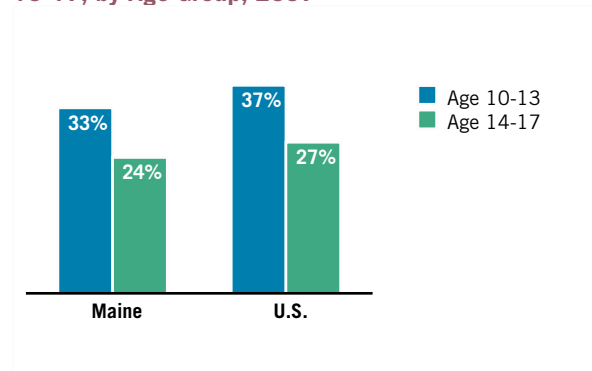
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
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Law and Legislation

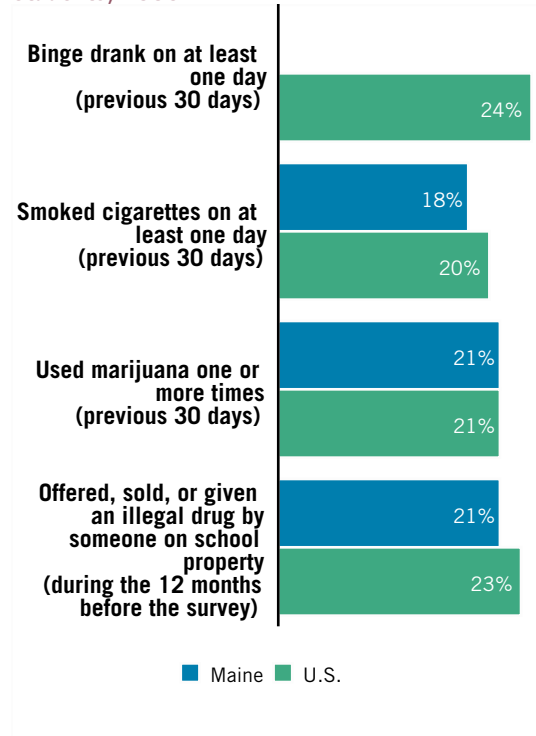
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

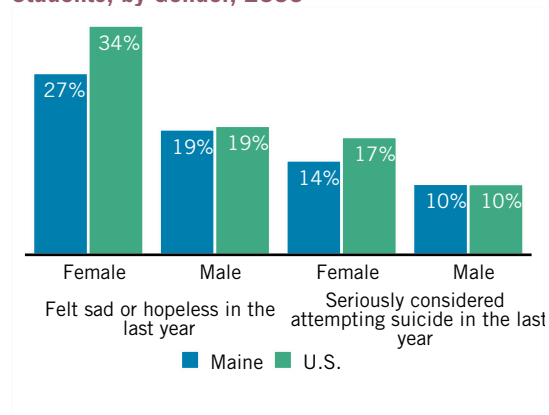
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
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Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
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- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹⁹¹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]¹⁹²

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

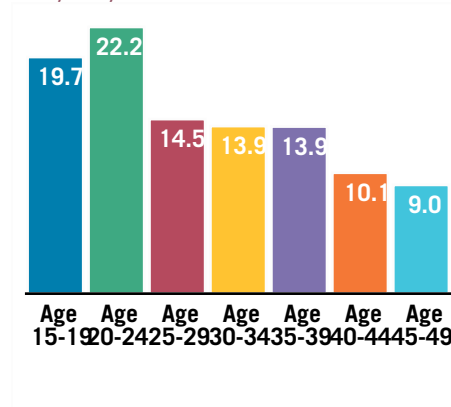
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹⁶³
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- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

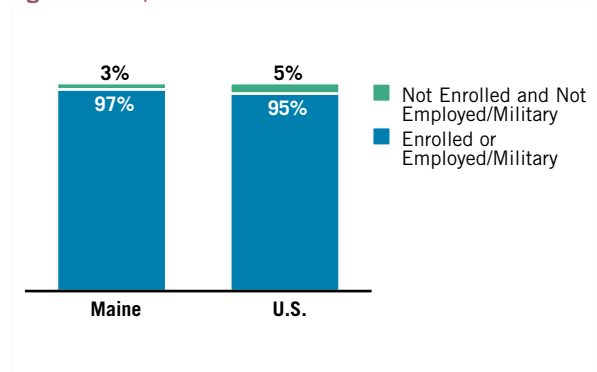
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

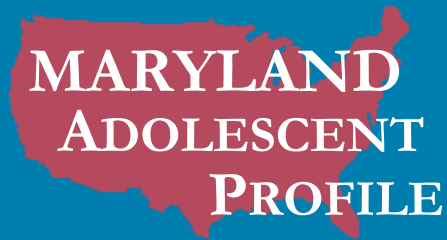
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





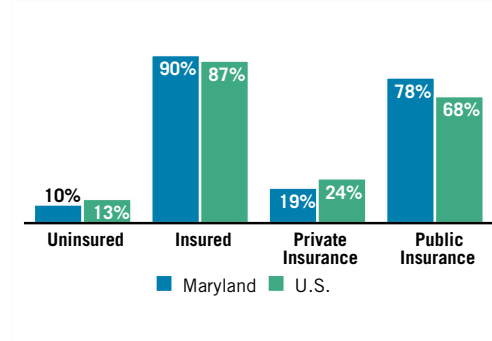
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



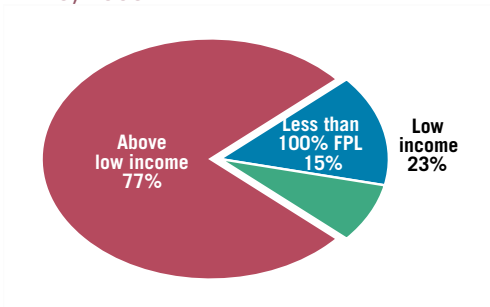
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Maryland's 512,332 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

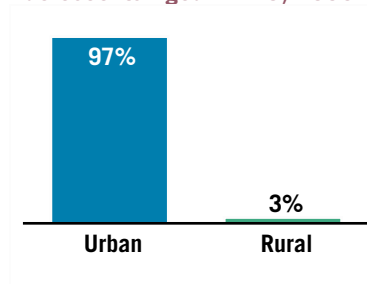
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



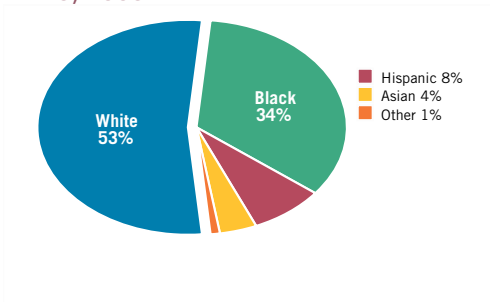
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

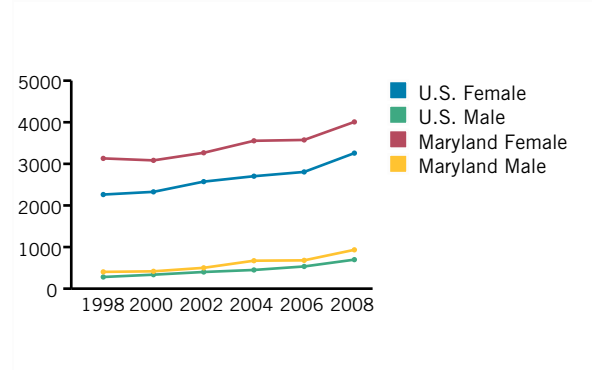
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- ☑ Require physical activity and fitness taught in schools [2006]⁵¹

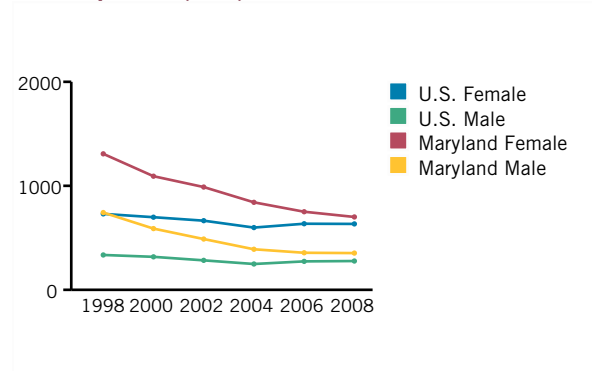
Services in Schools

- ☑ Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - ☑ Medicaid [2008]¹¹
 - ☑ CHIP [2008]¹¹
- ☑ Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁷⁶
- HIV and STI prevention and treatment services [2010]¹⁹³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

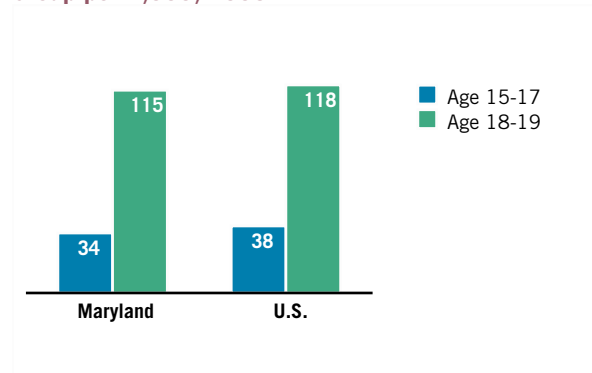
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

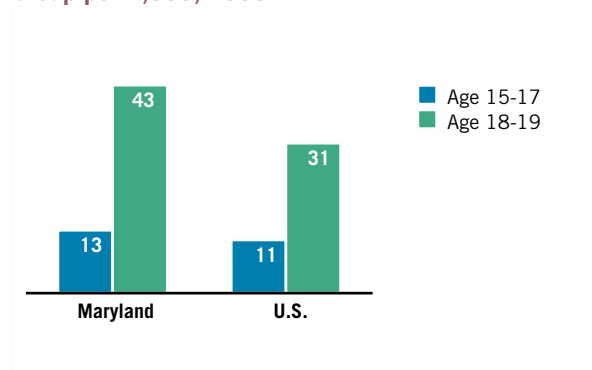
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

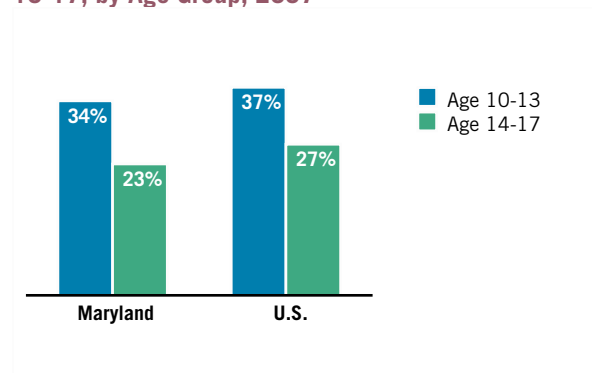
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

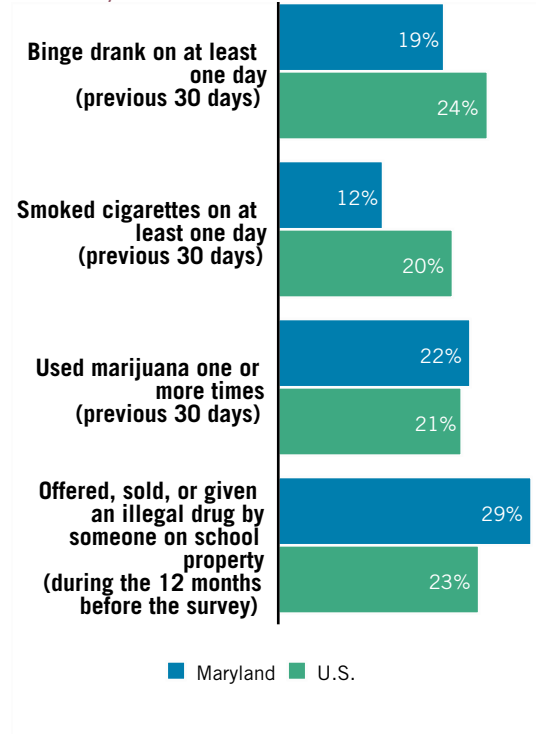
- Allow minors to consent to outpatient mental health care [2010]¹⁷⁷
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

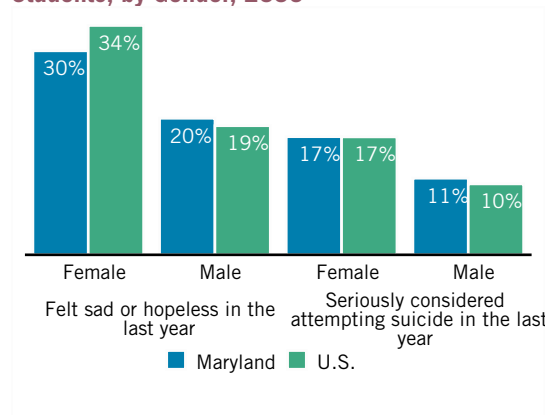
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹⁹⁵
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁹⁶
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

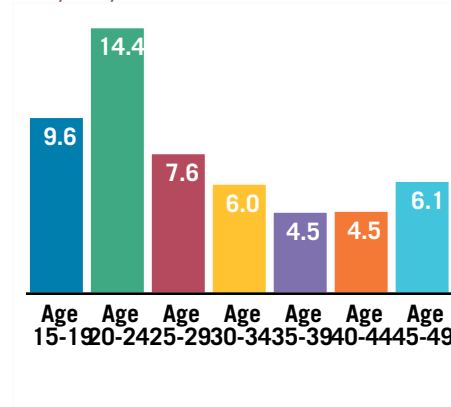
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹⁹⁷
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]¹⁹⁸

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

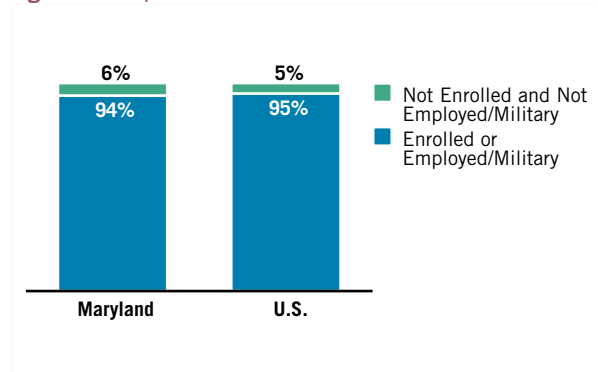
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

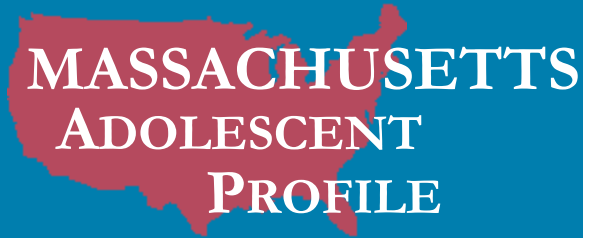
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





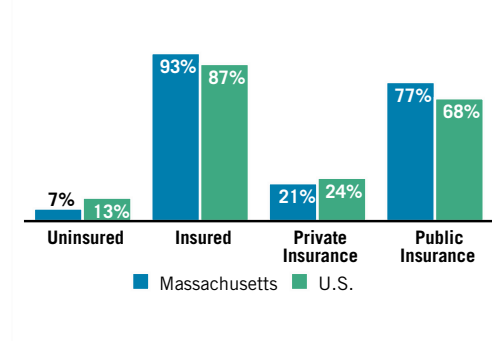
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



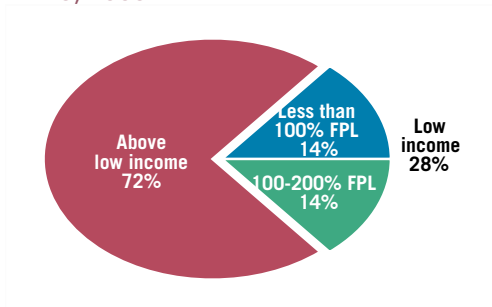
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Massachusetts's 544,827 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

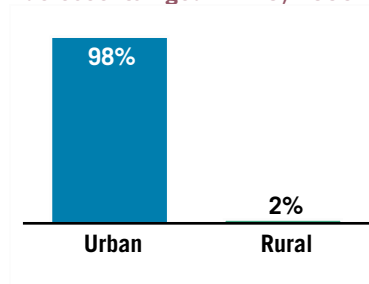
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



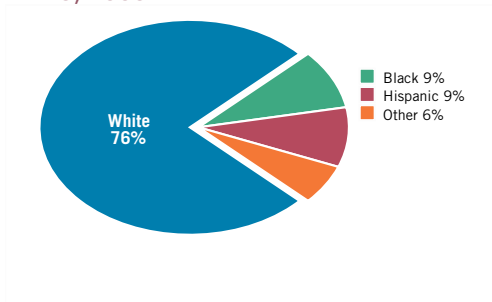
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

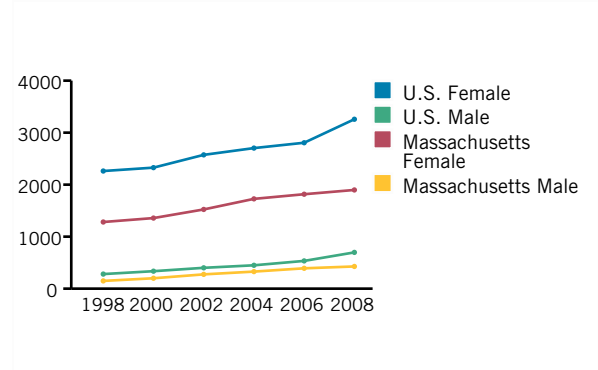
- Medicaid [2009]¹⁵³
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

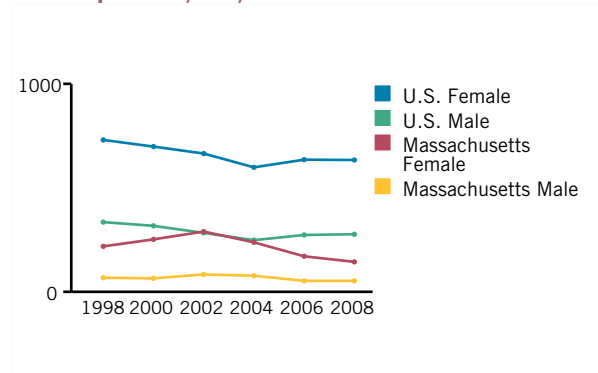
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁹⁹
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

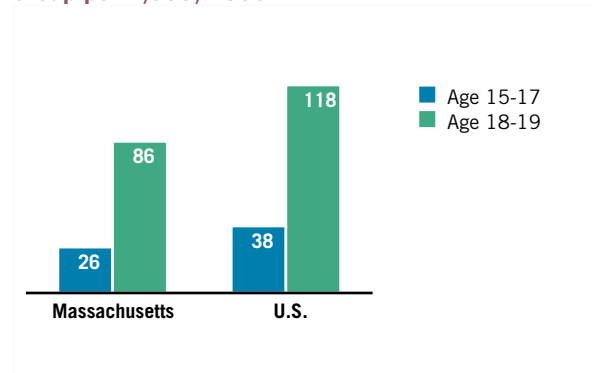
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

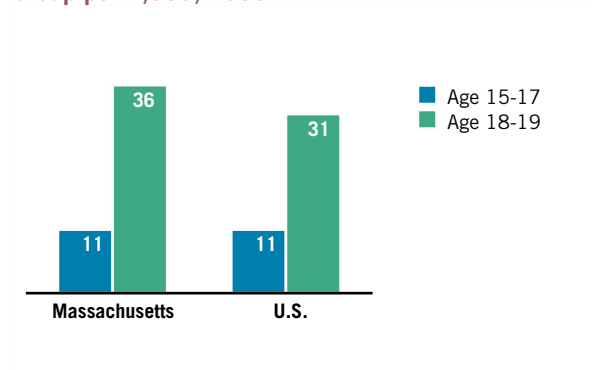
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

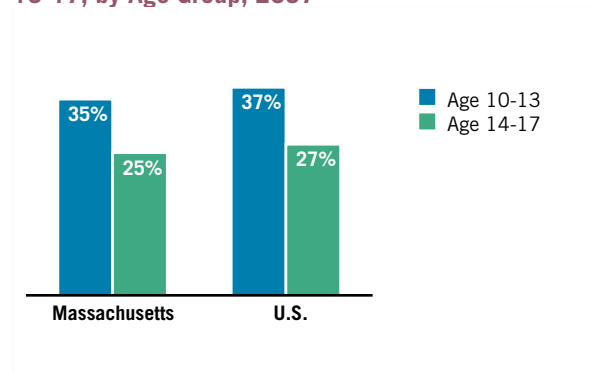
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²⁰⁰

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

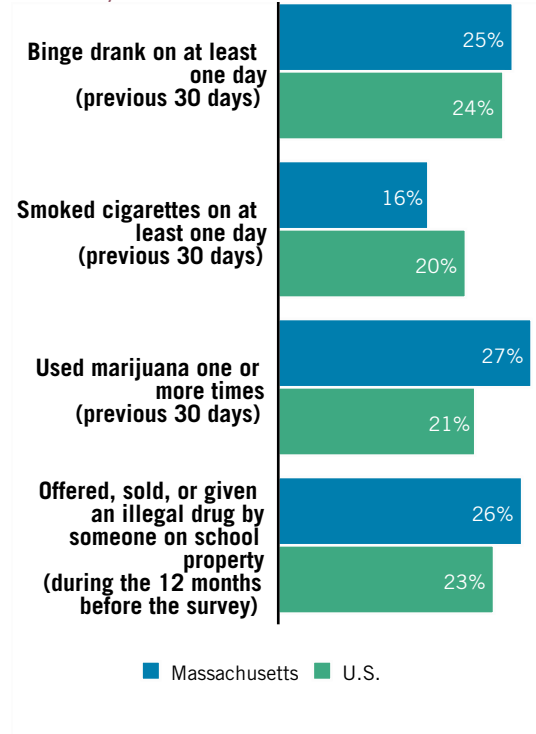
- Allow minors to consent to outpatient mental health care [2010]¹⁷⁷
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁰¹

State Choices to Promote Quality

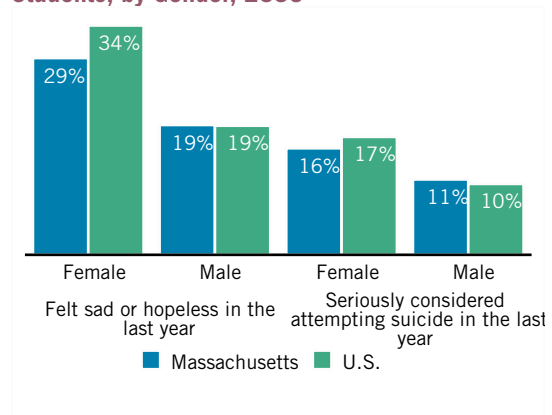
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

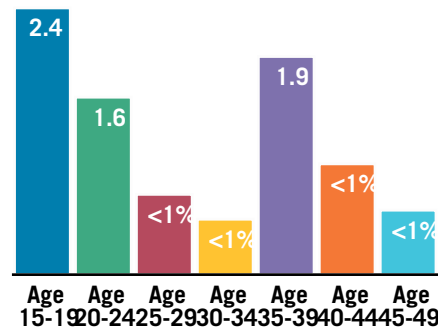
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

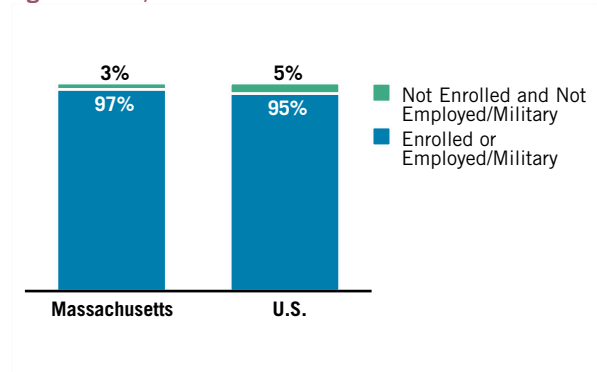
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





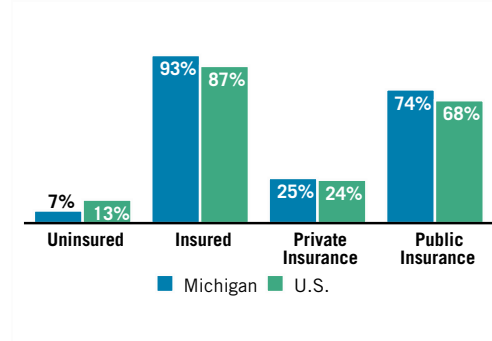
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



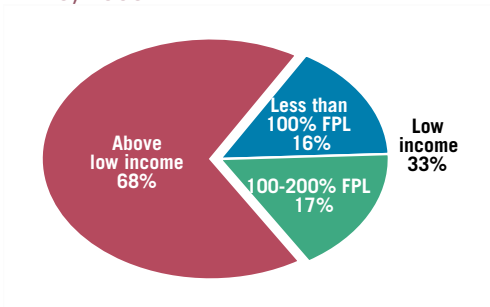
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Updated: June 1, 2011

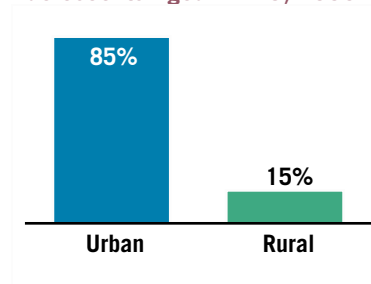
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



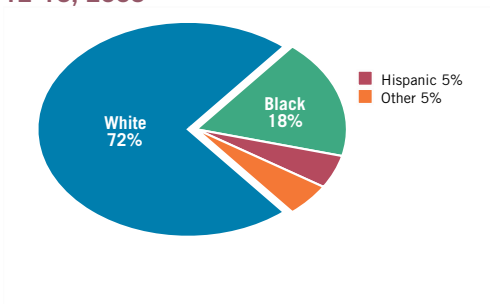
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

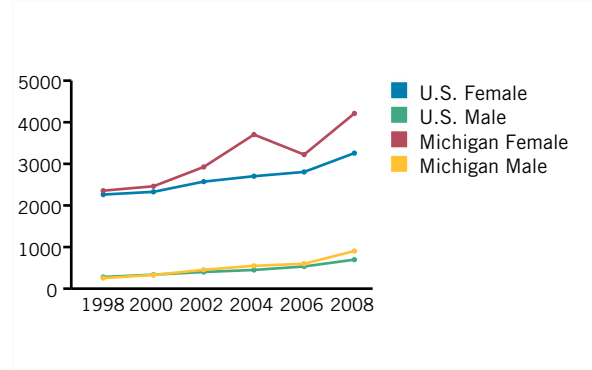
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁰²
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

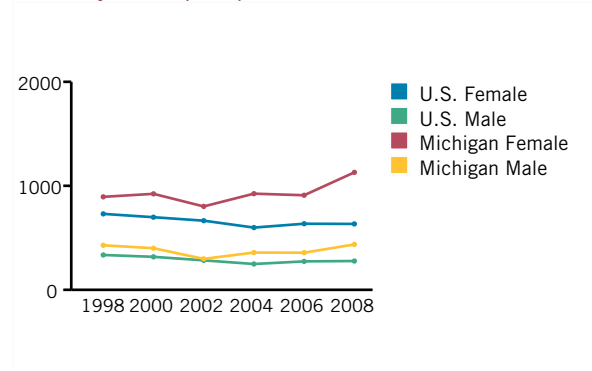
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]²⁰³
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁷⁶
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁷⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²⁰⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

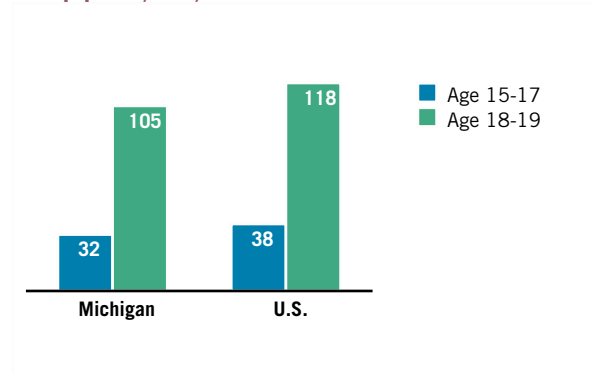
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

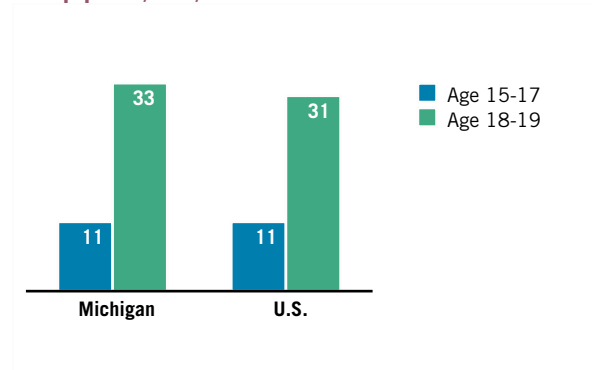
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

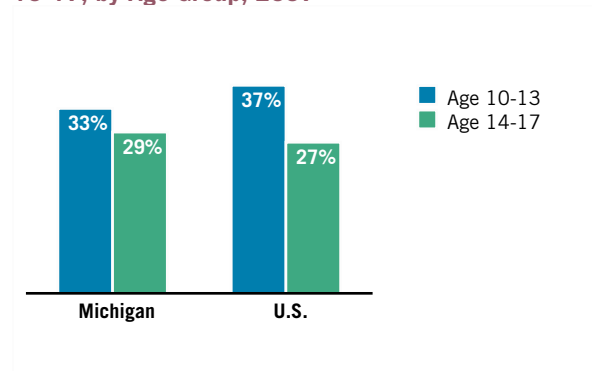
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁹⁸

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

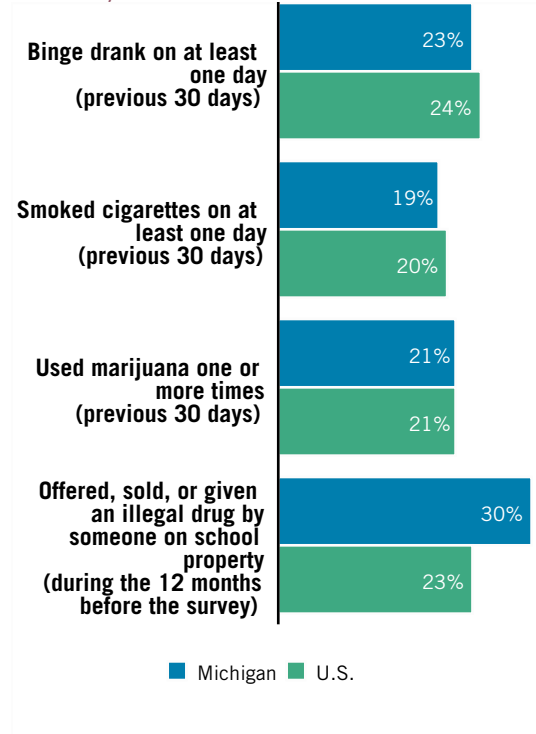
- Allow minors to consent to outpatient mental health care [2010]²⁰⁵
- Allow minors to consent to care for drug or alcohol abuse [2010]⁵⁶

State Choices to Promote Quality

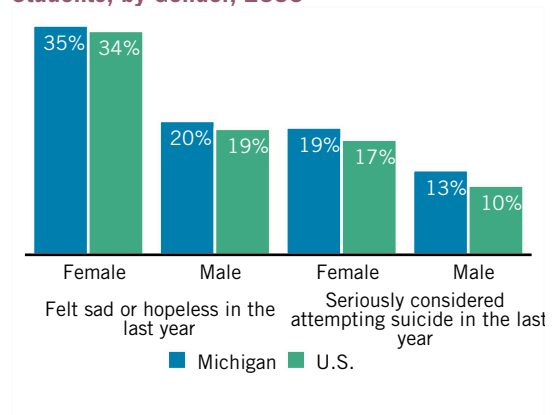
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

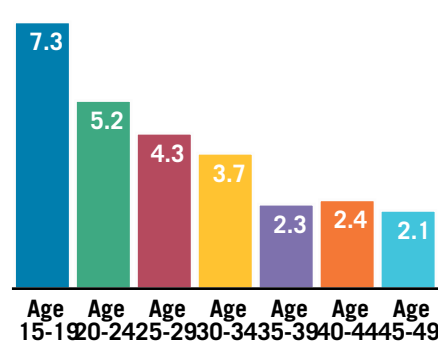
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]²⁰⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

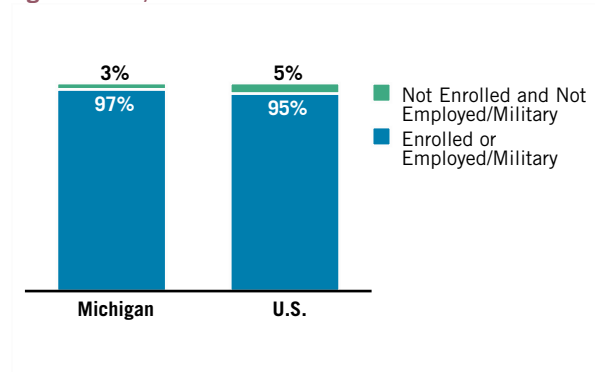
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





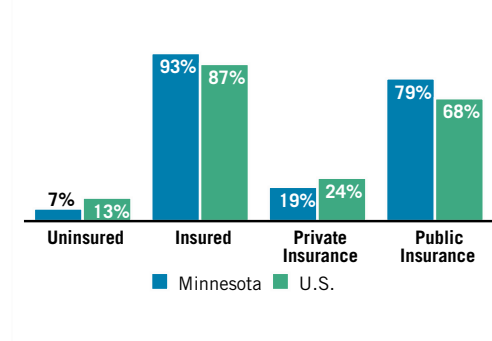
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



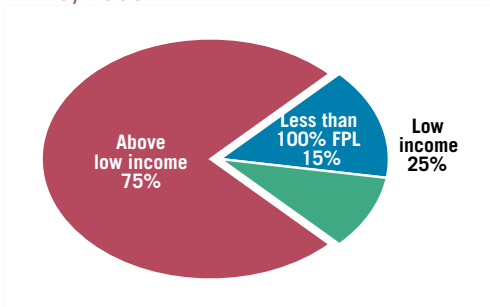
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Minnesota's 463,200 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

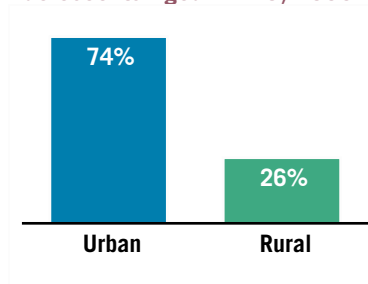
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



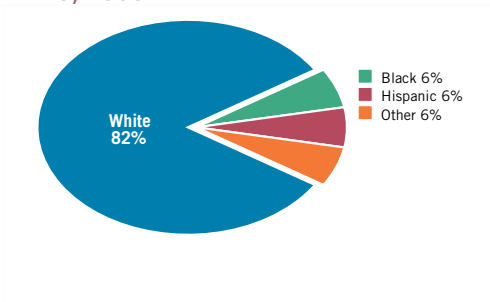
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

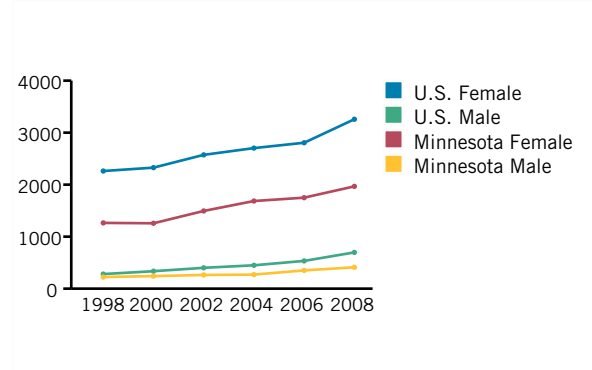
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁰⁷
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]¹⁸¹
- Require CHIP coverage for contraceptives [2006]²⁰⁸
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

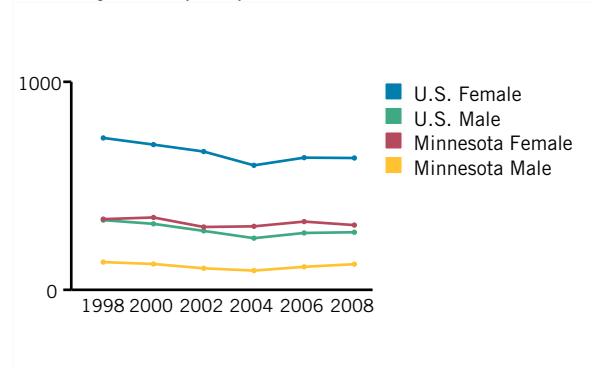
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]²⁰³
 - CHIP [2008]²⁰³
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁹³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²⁰⁹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]⁹⁷
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]¹⁵⁹
- Specify time requirements for physical education [2006]²¹

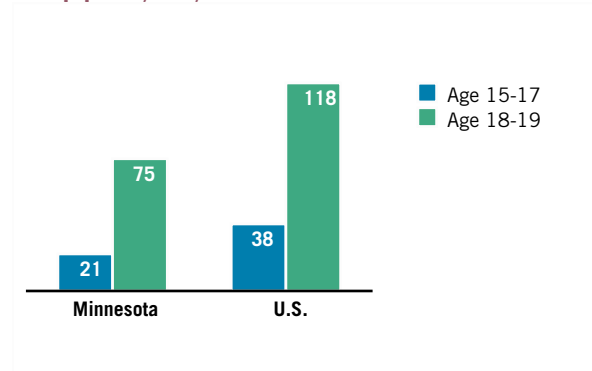
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

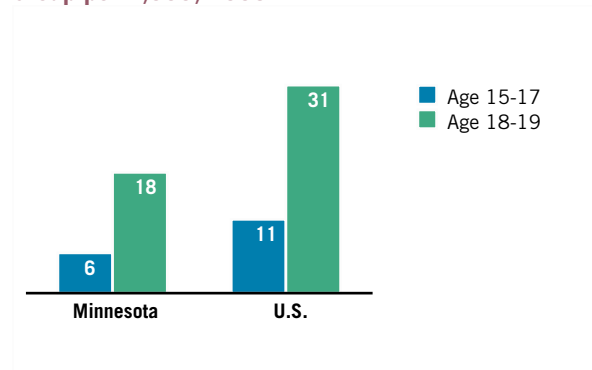
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

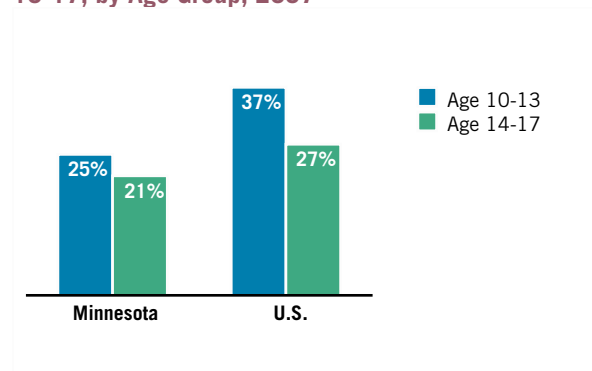
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

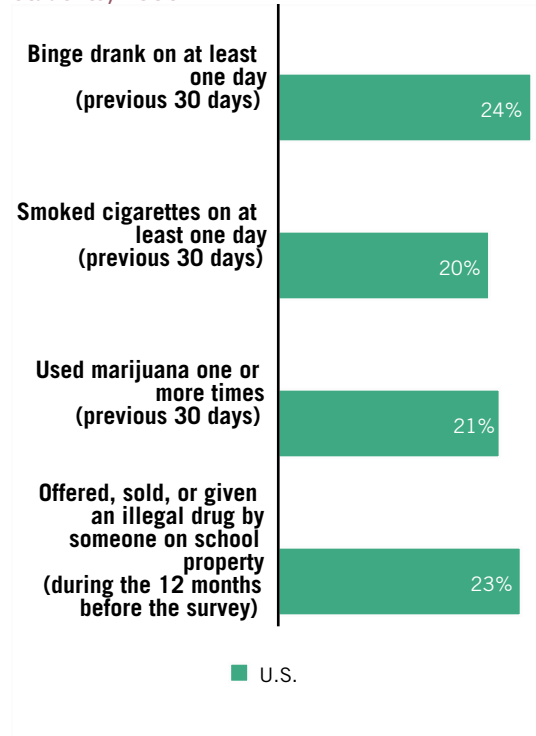
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

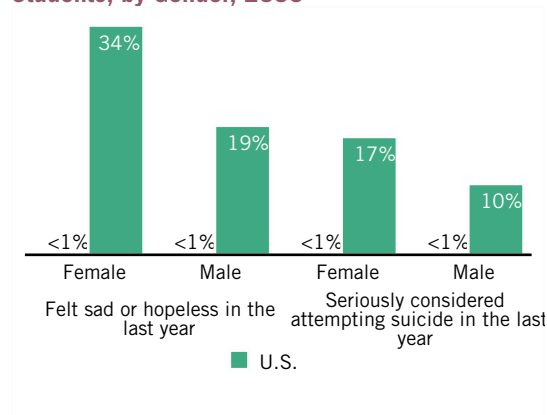
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
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- 51% Had nervous or worried feelings keep you from doing things you want to do?
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- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

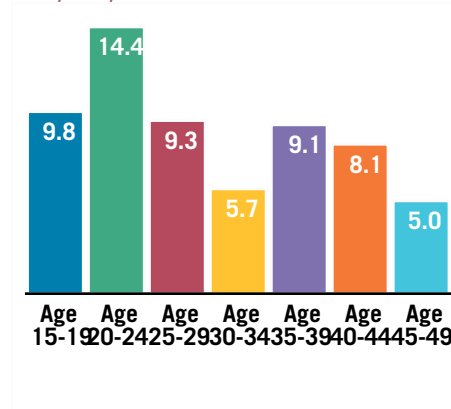
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²¹⁰
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]²¹¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]¹⁰¹
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]²¹²
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]²¹³

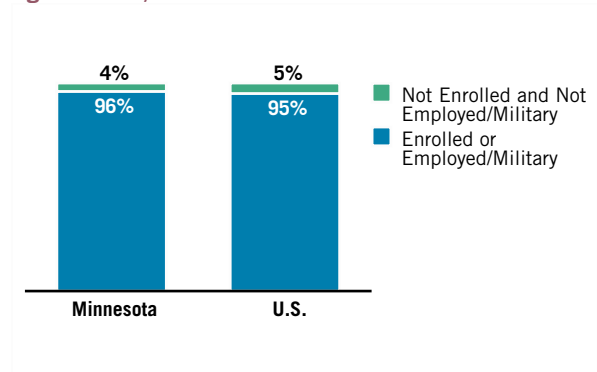
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

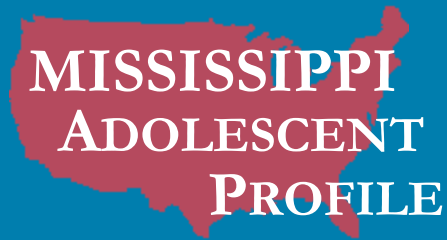
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





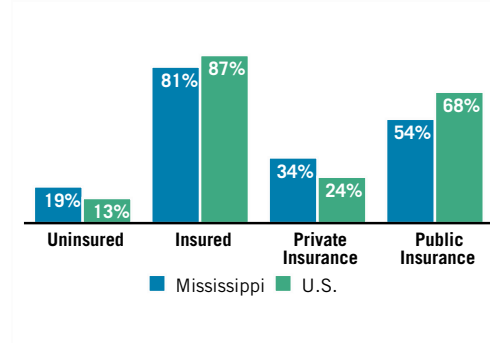
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



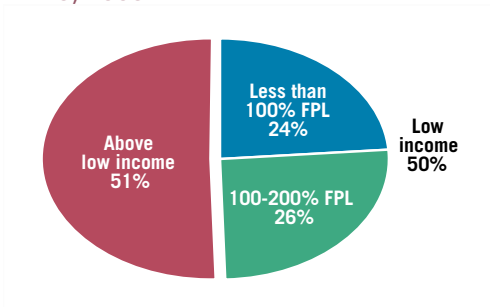
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Mississippi's 284,932 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

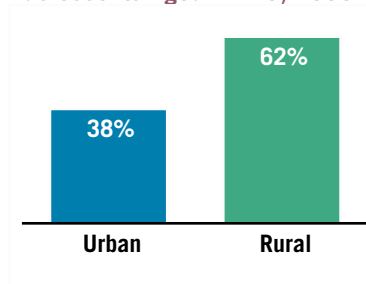
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



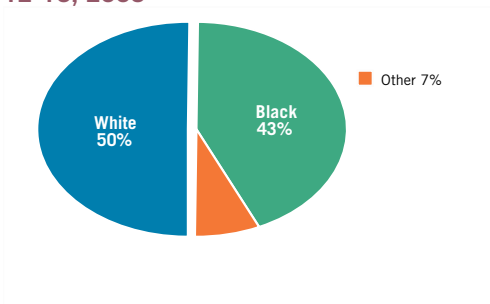
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

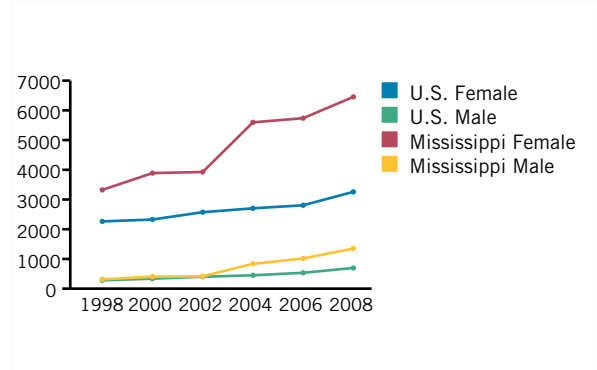
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

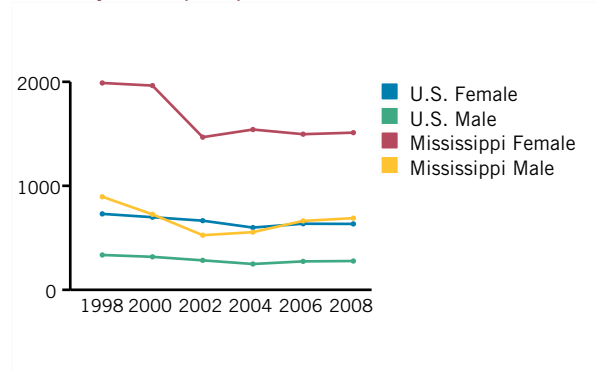
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]²¹⁴
- HIV and STI prevention and treatment services [2010]²¹⁵
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²¹⁶

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

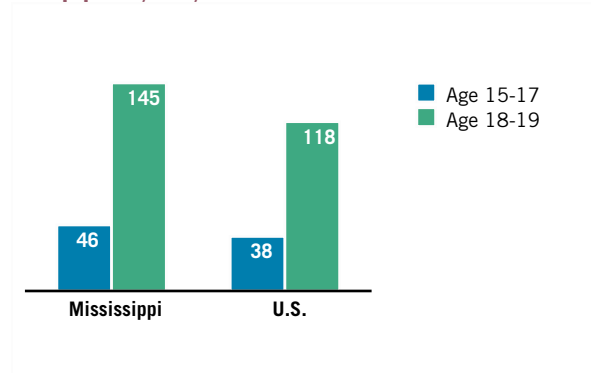
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

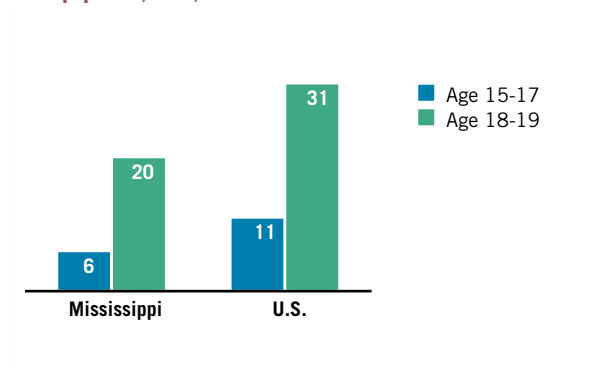
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

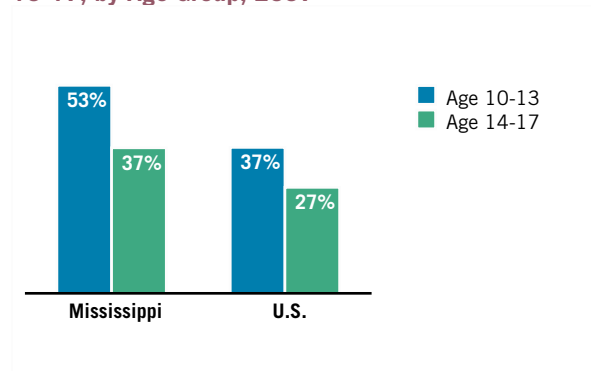
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

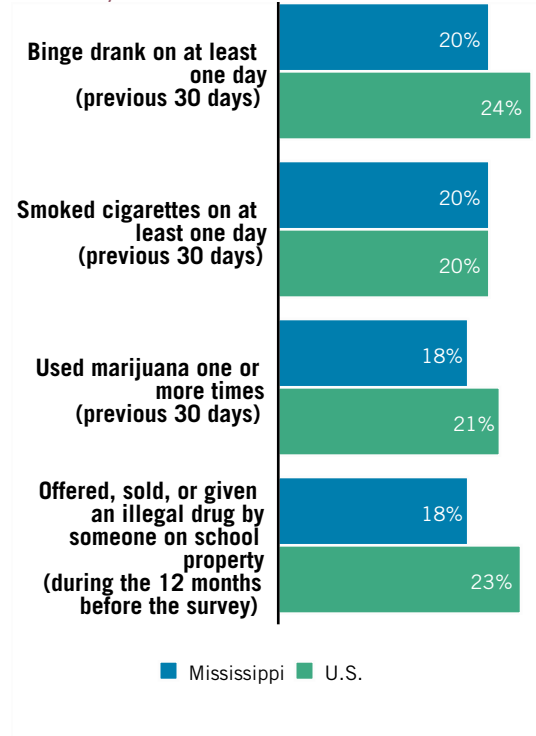
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²¹⁷

State Choices to Promote Quality

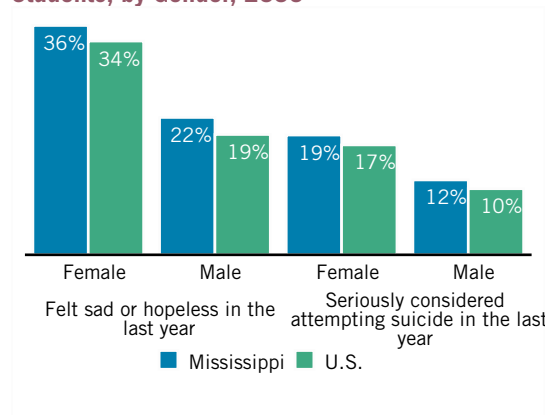
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

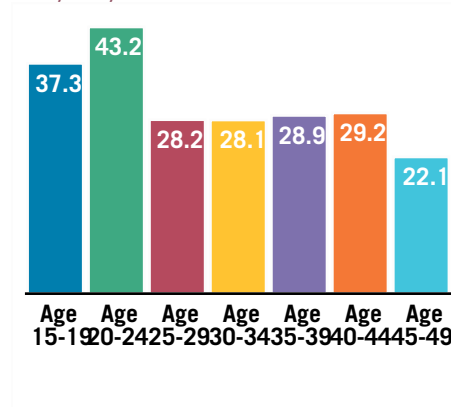
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]²¹⁸
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]²¹⁹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]²²⁰
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

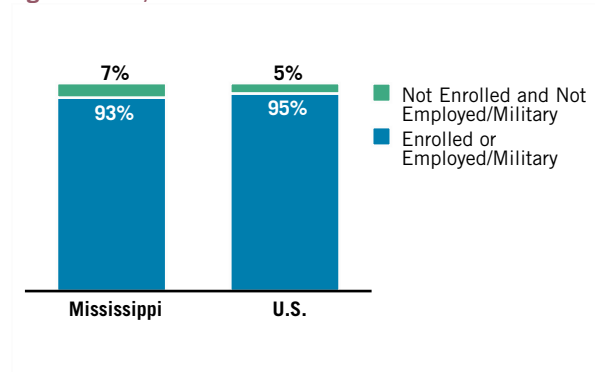
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





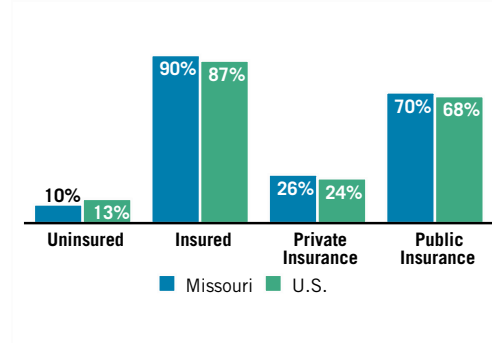
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



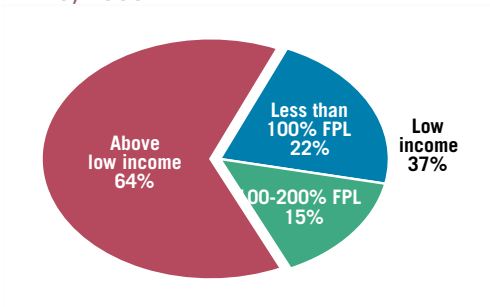
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Missouri's 529,813 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

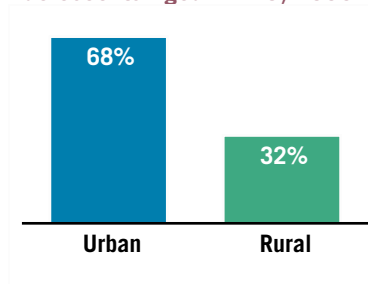
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



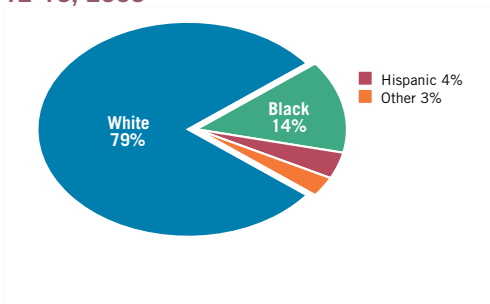
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

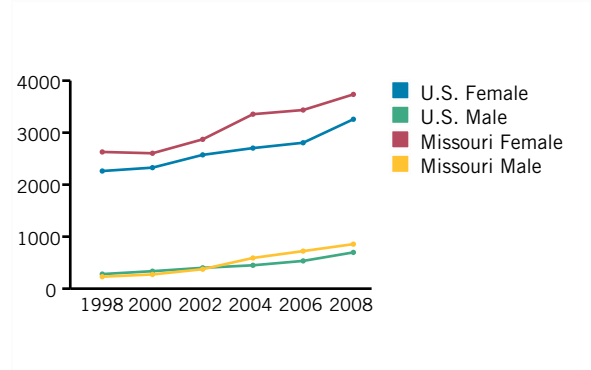
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

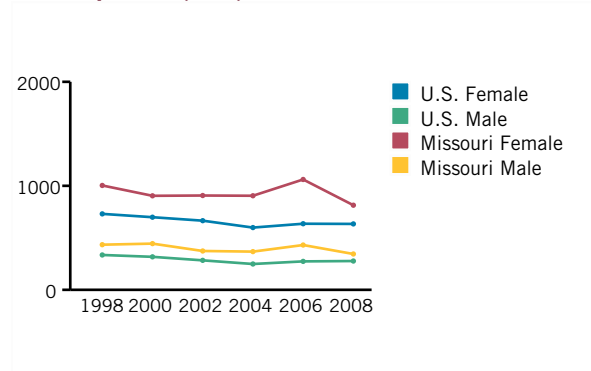
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁷⁶
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁹³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²²¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

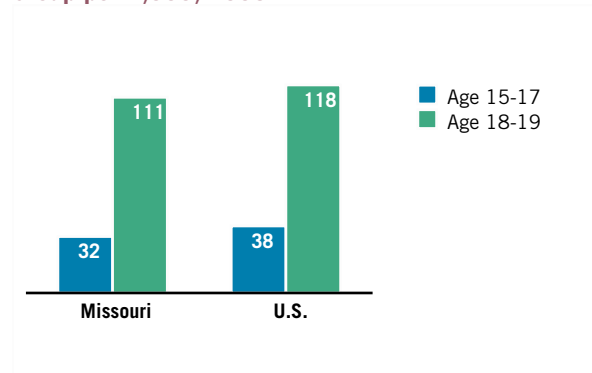
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

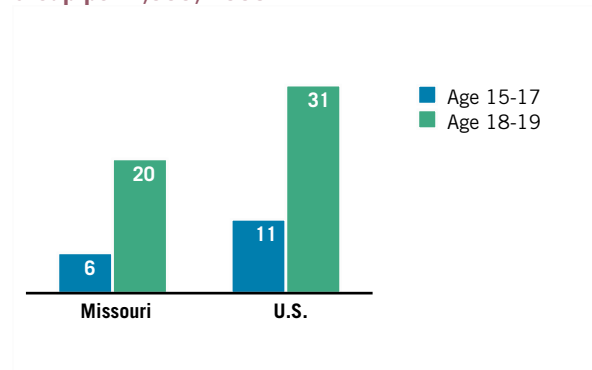
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

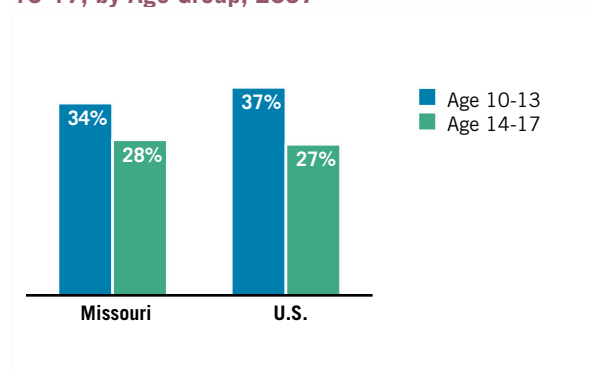
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

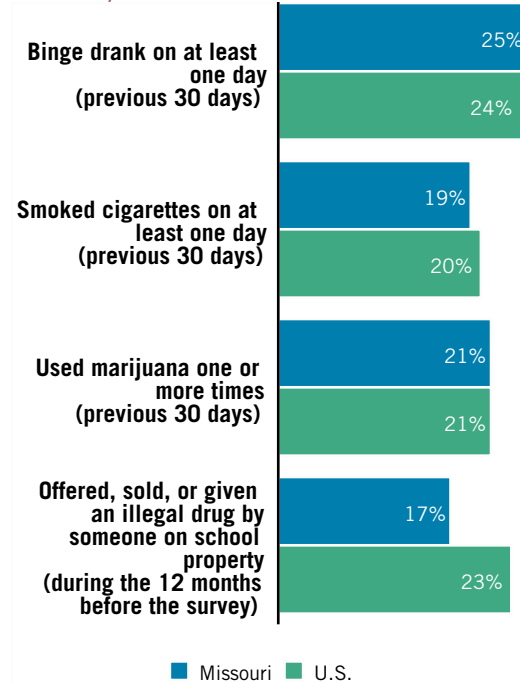
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

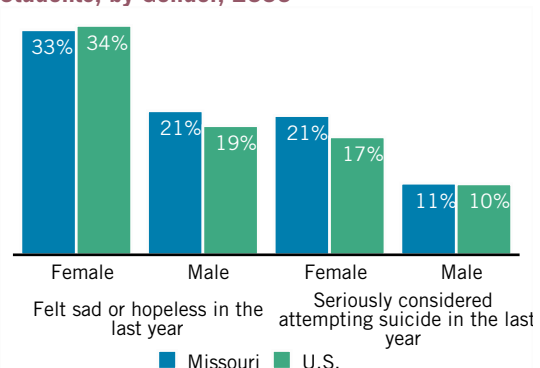
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

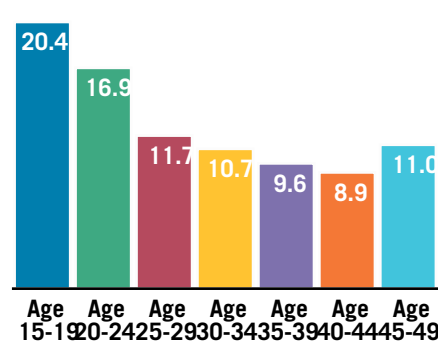
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²²²
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

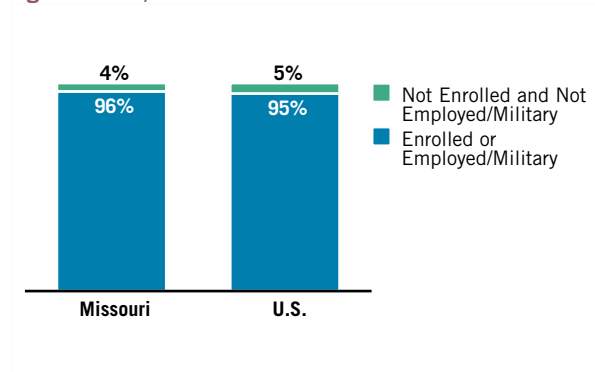
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

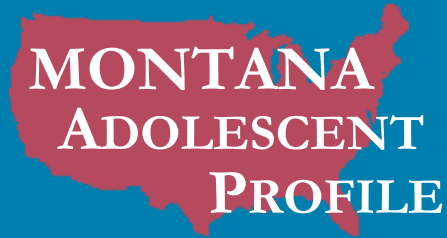
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





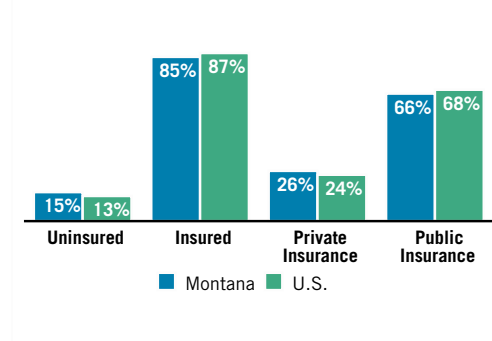
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



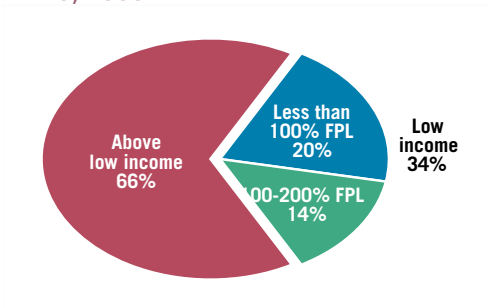
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Montana's 86,262 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

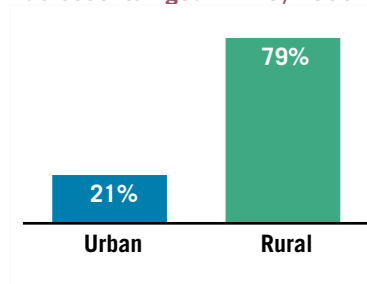
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



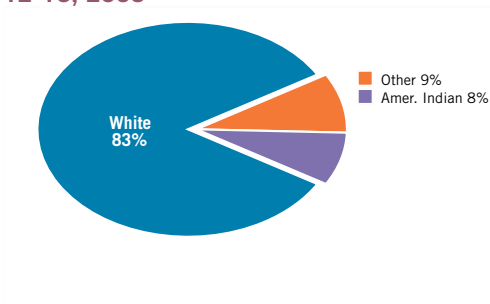
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

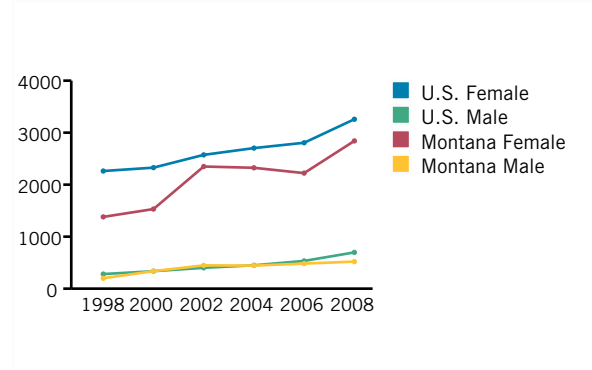
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
- HIV prevention education [2006]⁵¹
- STI prevention education [2006]⁵¹
- Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

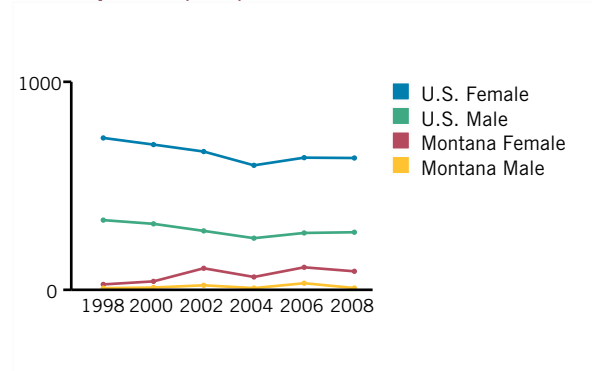
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]²²³
- Contraceptive and family planning services [2010]¹⁸⁷
- HIV and STI prevention and treatment services [2010]²²³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

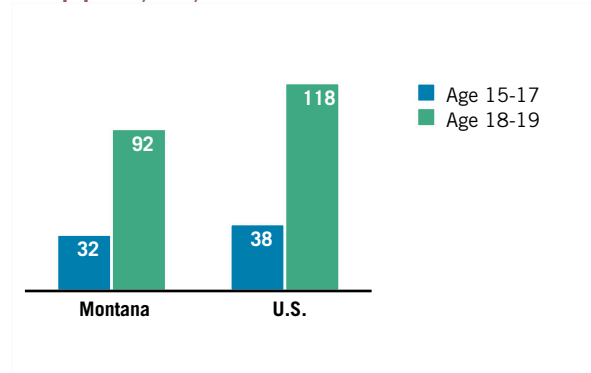
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

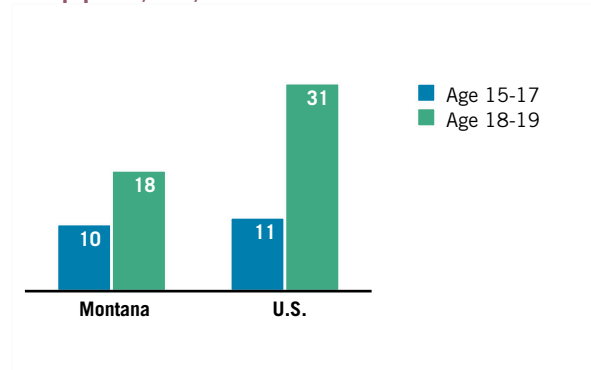
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

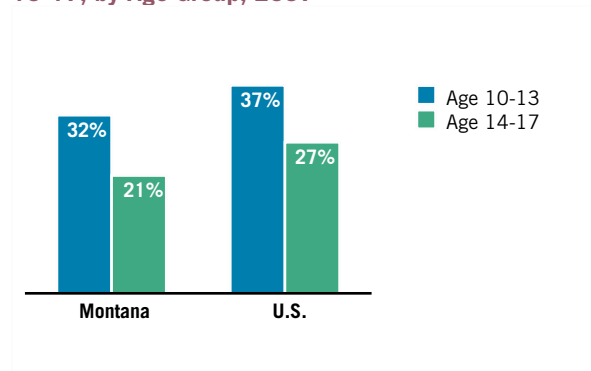
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

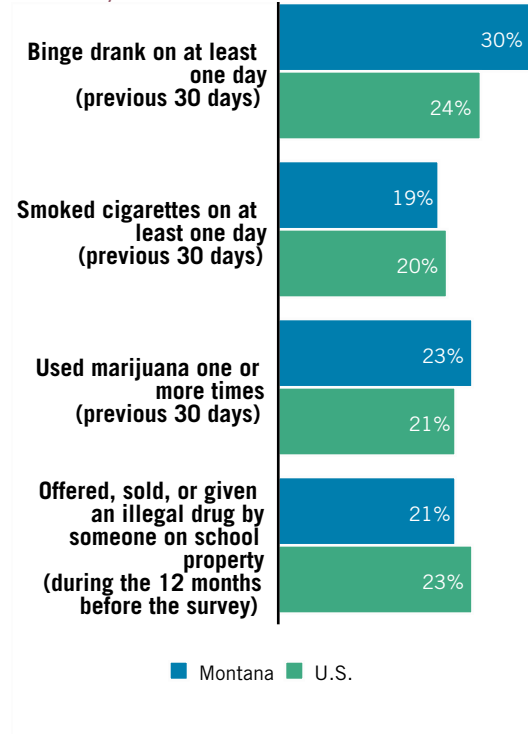
- Allow minors to consent to outpatient mental health care [2010]²²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

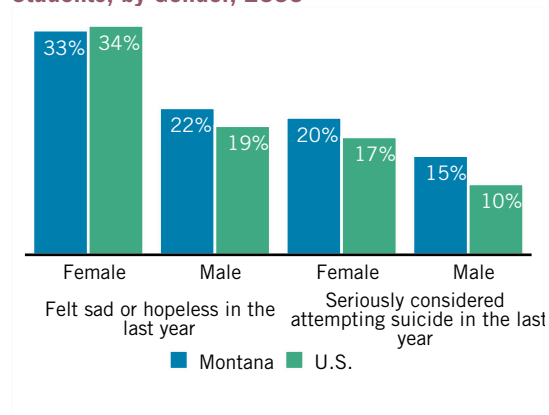
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

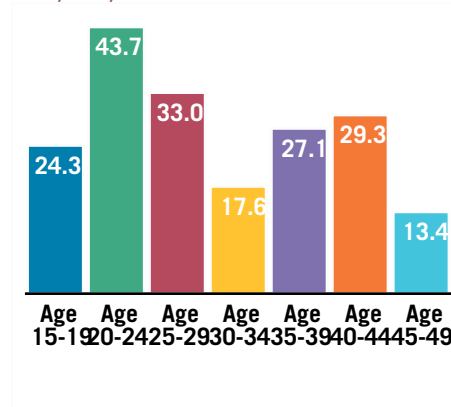
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]²²⁵
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

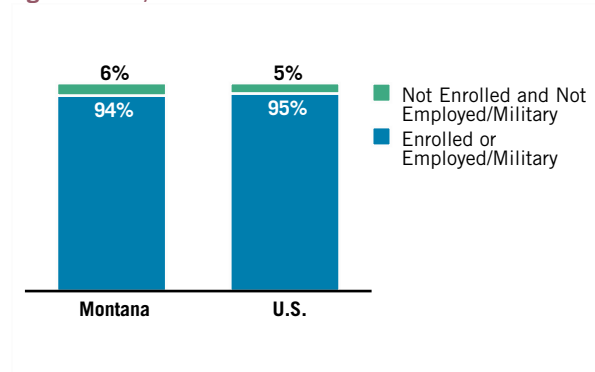
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





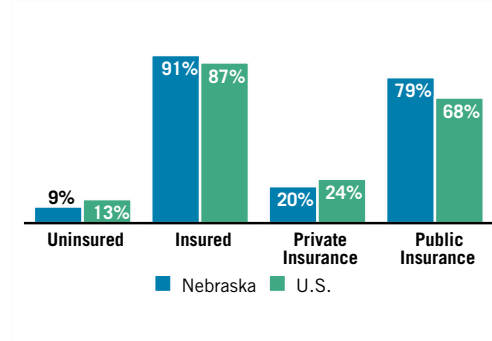
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



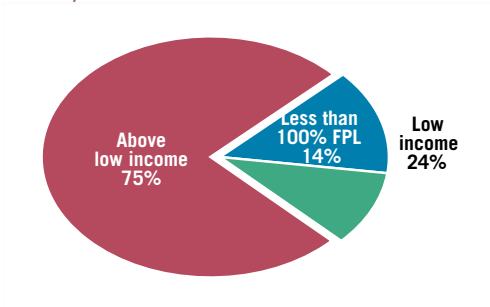
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Nebraska's 151,642 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

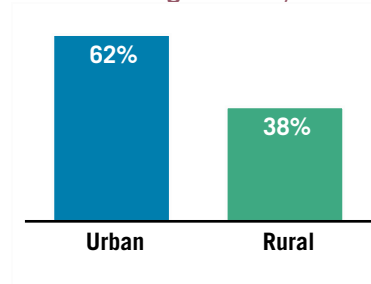
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



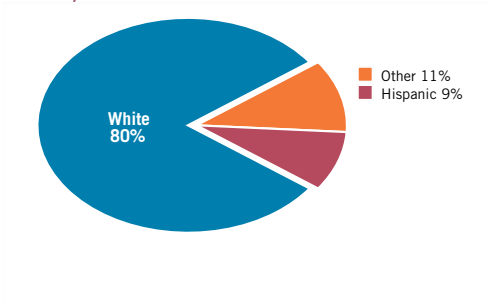
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

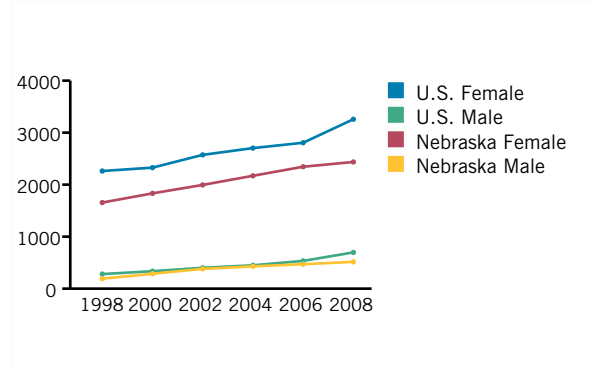
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]²²⁶
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

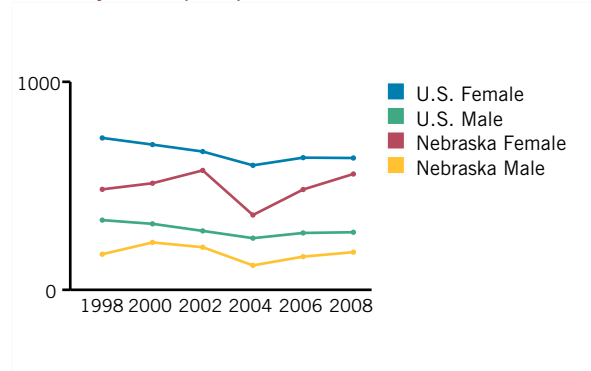
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]²²⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

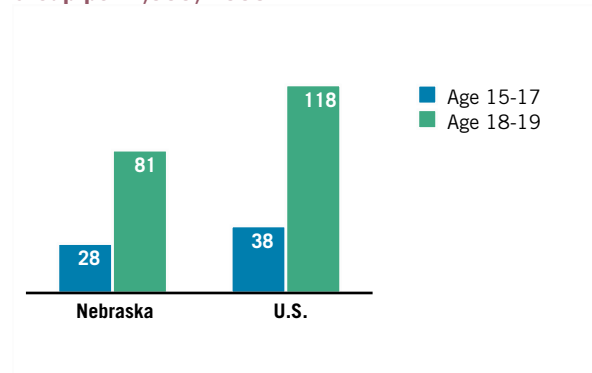
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

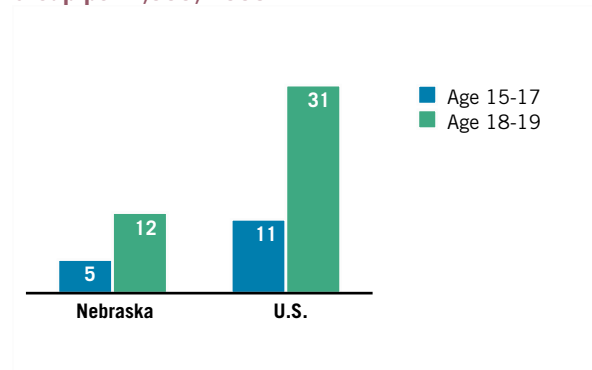
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

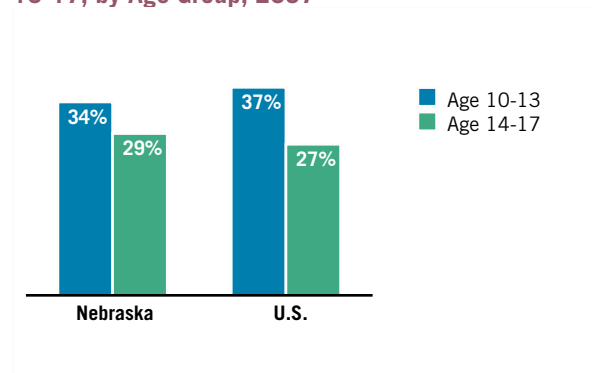
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

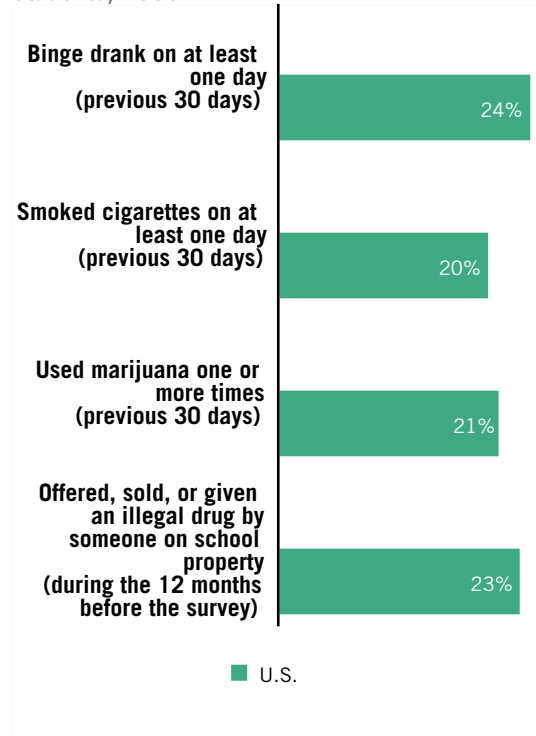
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

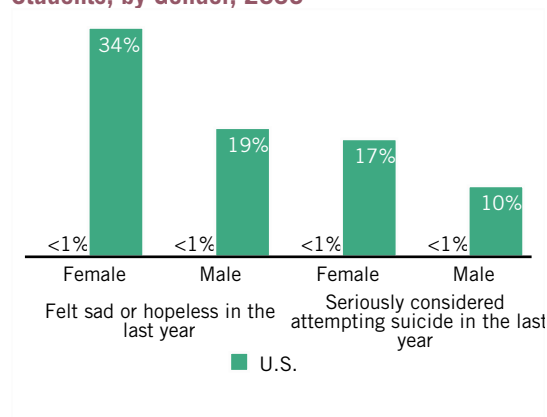
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

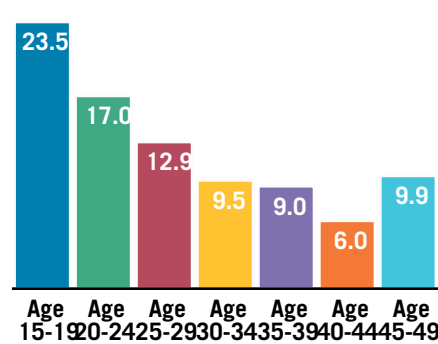
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]¹⁹⁶
- Ban texting while driving for adolescent novice drivers [2010]¹⁶⁹
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]²²⁸

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]²²⁸

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

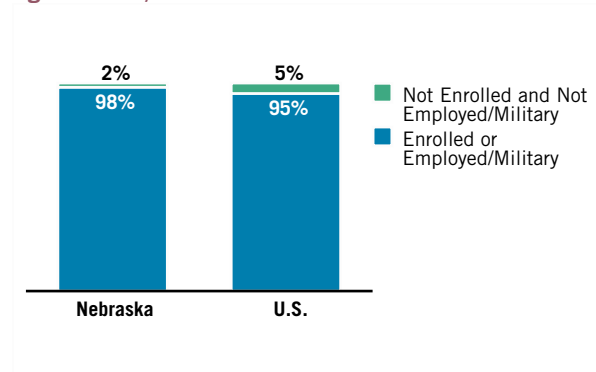
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

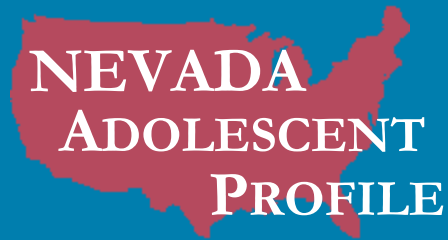
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





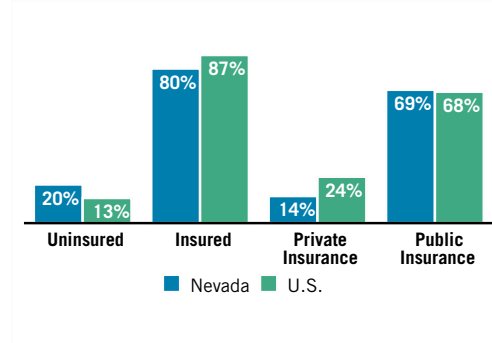
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



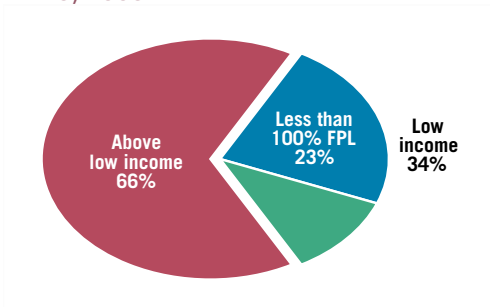
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Nevada's 237,620 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

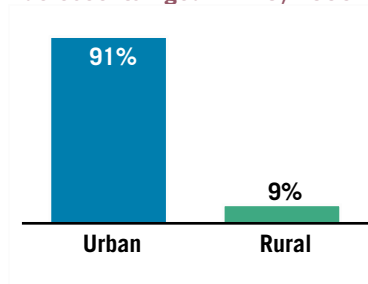
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



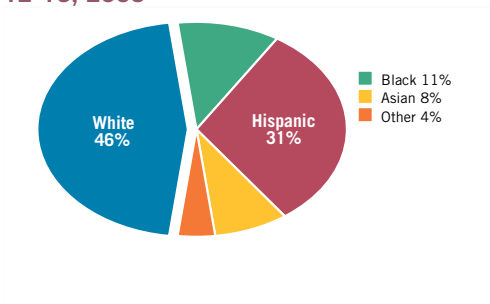
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

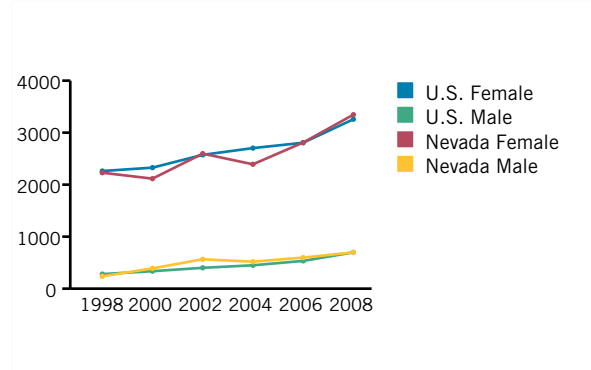
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²²⁹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

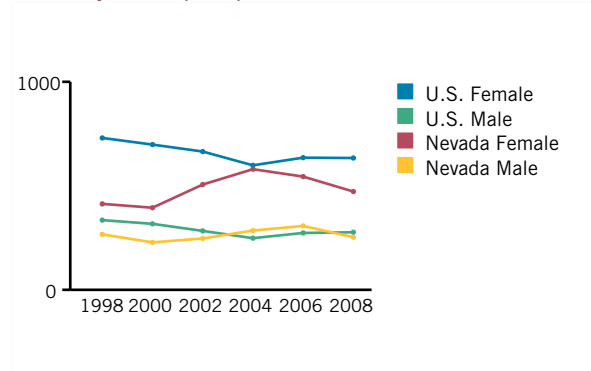
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

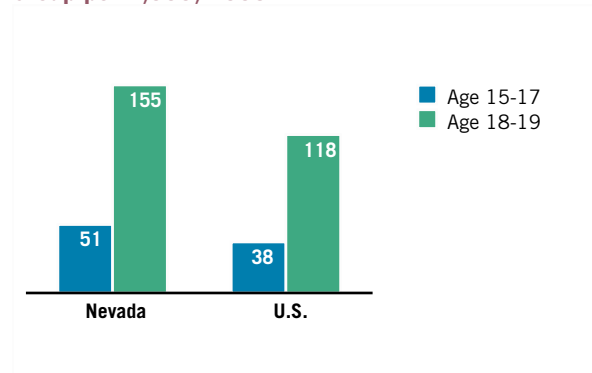
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

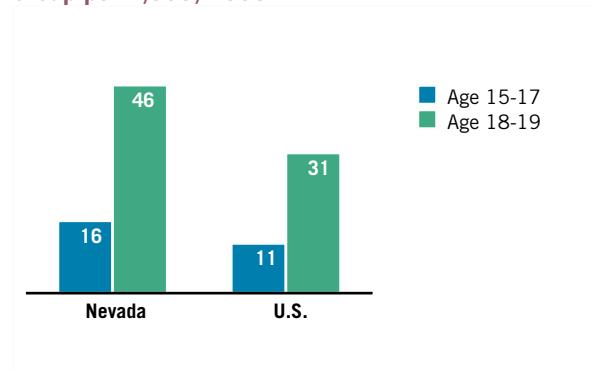
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

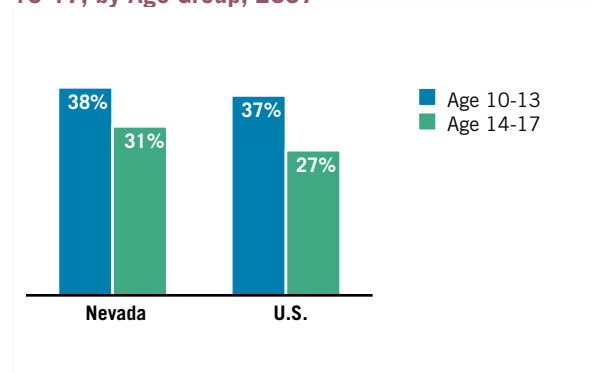
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

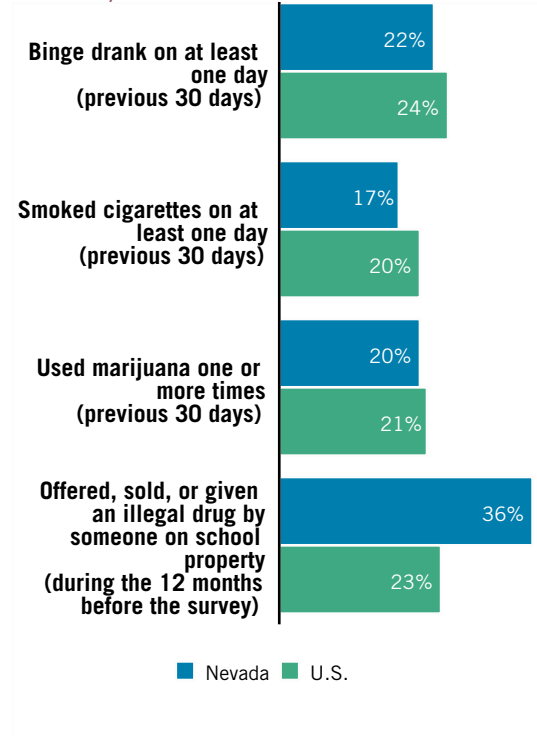
- Allow minors to consent to outpatient mental health care [2010]²³⁰
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

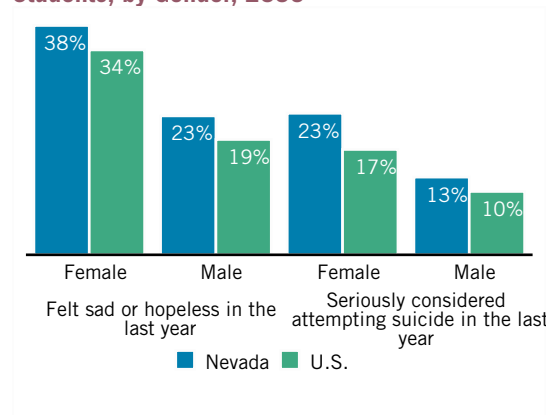
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]²³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

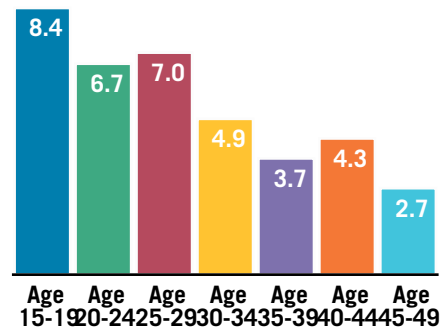
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]²³²
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]²³³

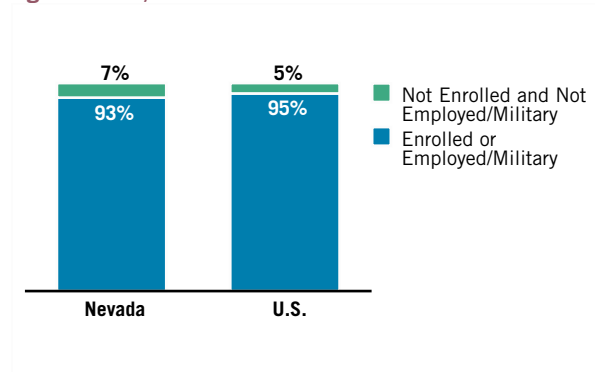
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





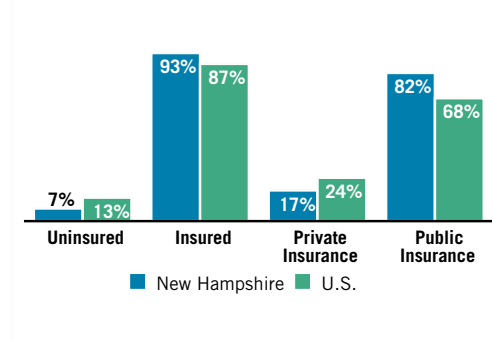
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



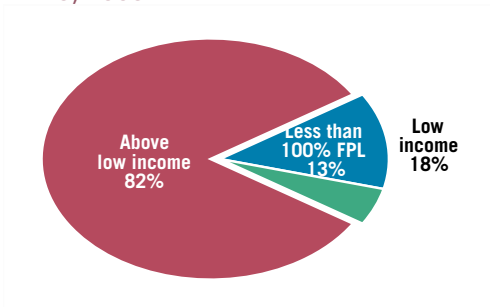
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Updated: June 1, 2011

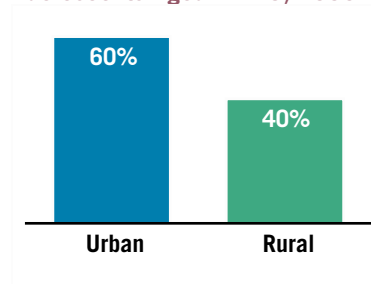
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



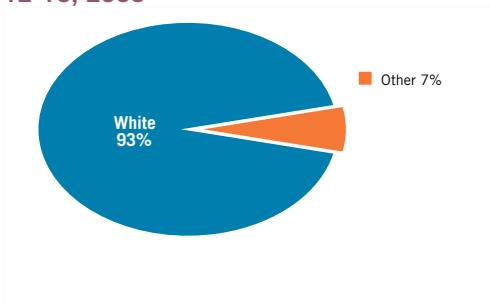
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

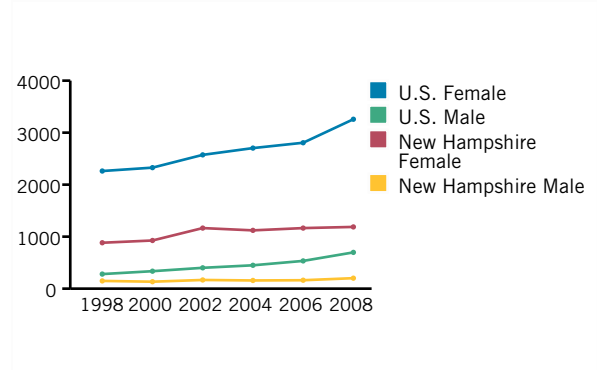
- Medicaid [2009]²³⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²³⁵
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- Require CHIP coverage for contraceptives [2006]⁵⁰
- HIV prevention education [2006]⁵¹
- STI prevention education [2006]⁵¹
- Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

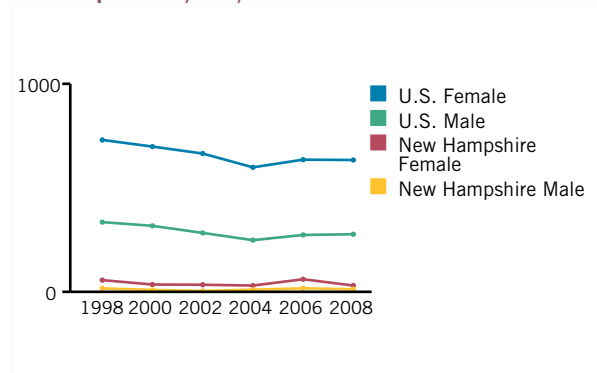
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]²³⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

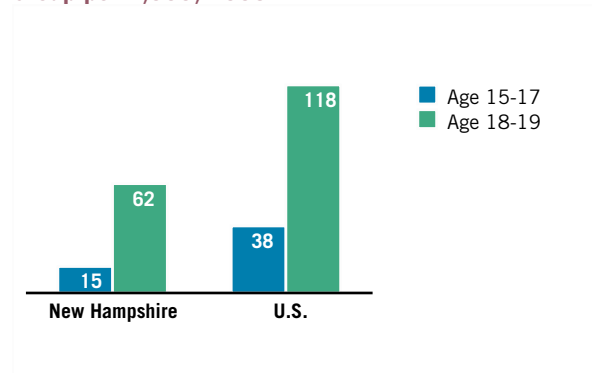
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

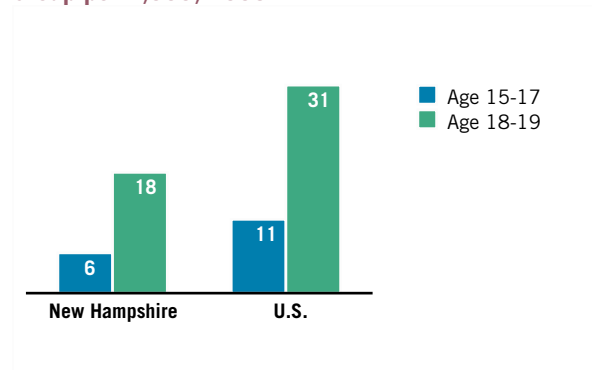
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

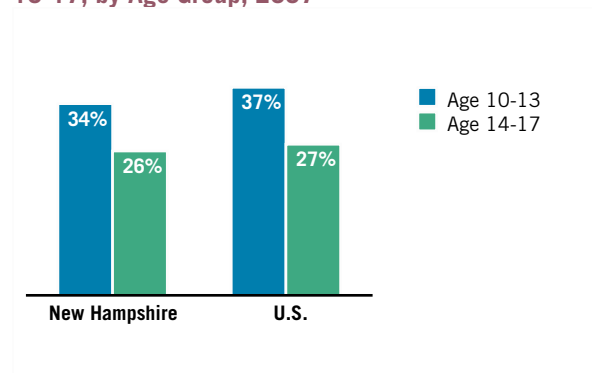
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

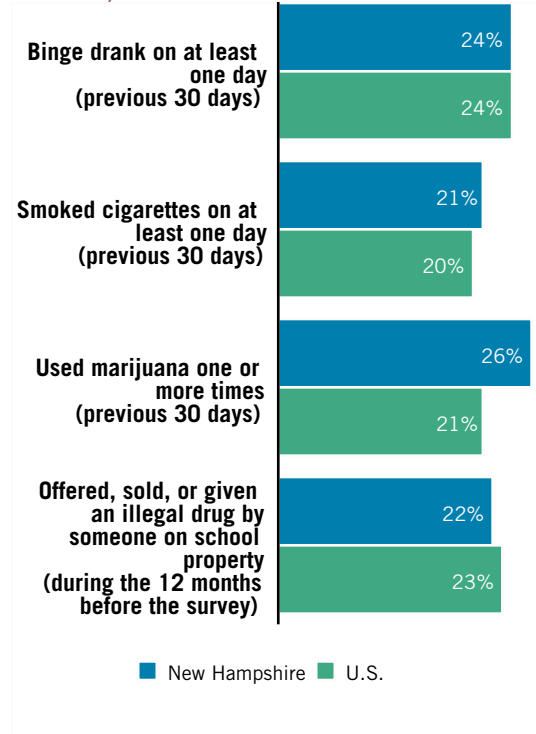
- Allow minors to consent to outpatient mental health care [2010]²³⁷
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State Choices to Promote Quality

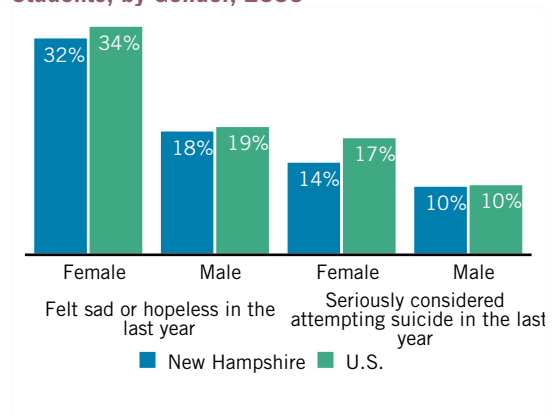
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

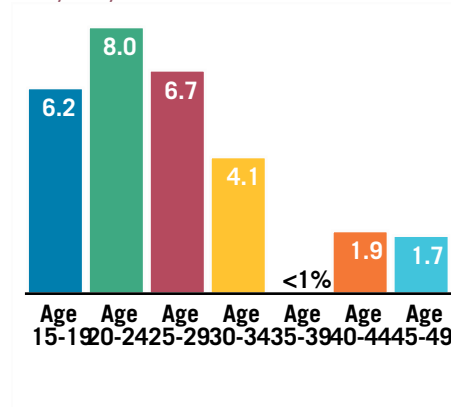
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

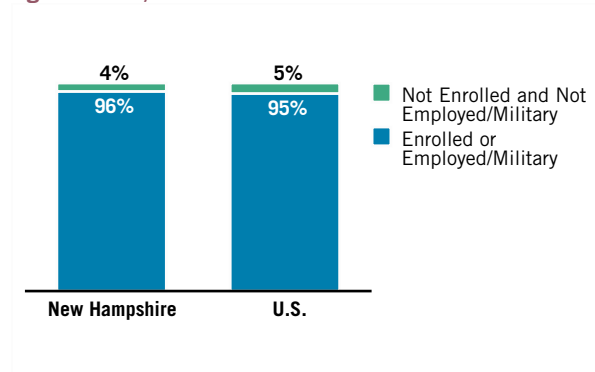
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





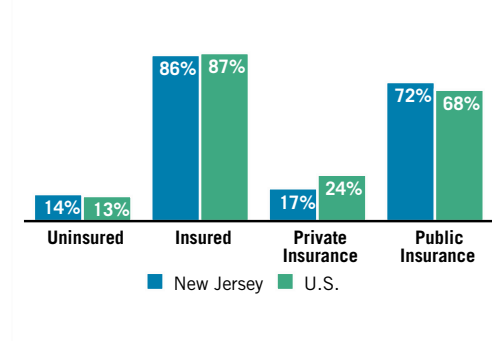
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



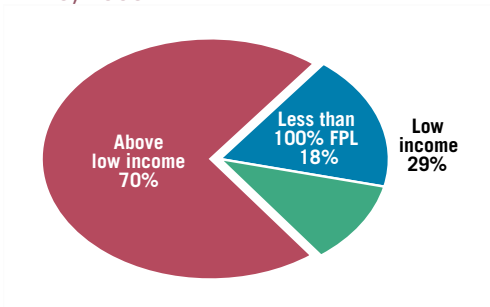
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on New Jersey's 791,786 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

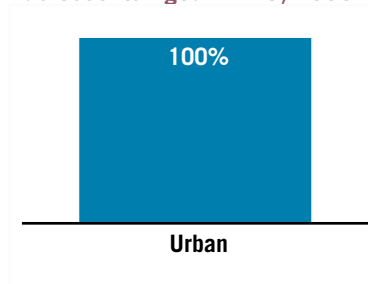
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



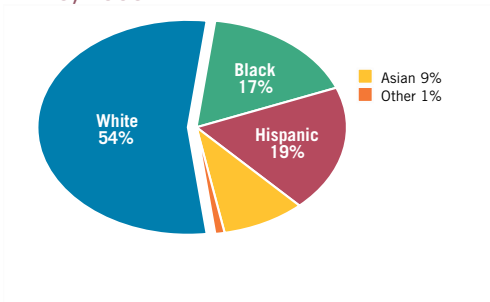
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

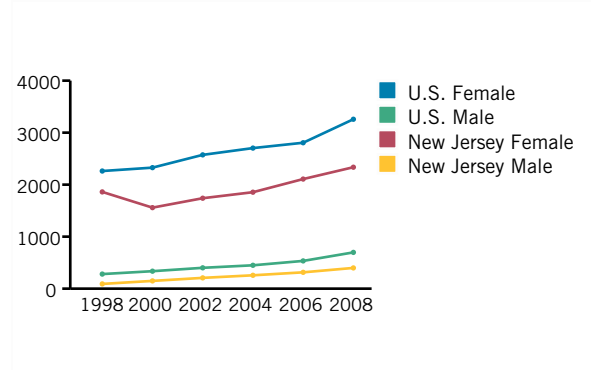
- Medicaid [2009]²³⁹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁴⁰
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

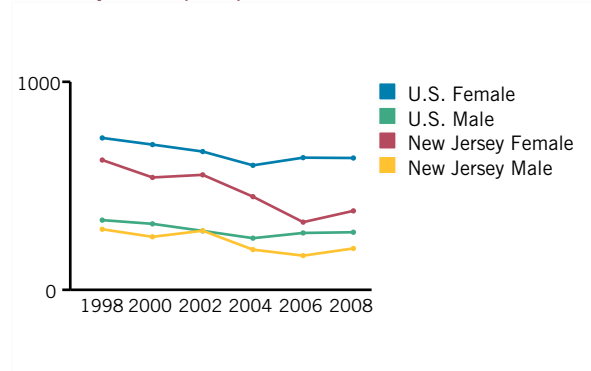
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁷⁶
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]²⁴¹
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- Abortion without parental notification or permission [2010]⁶⁷

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

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- Specify time requirements for physical education [2006]²¹

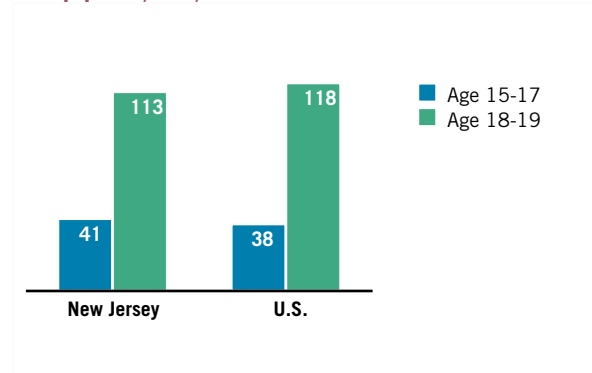
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

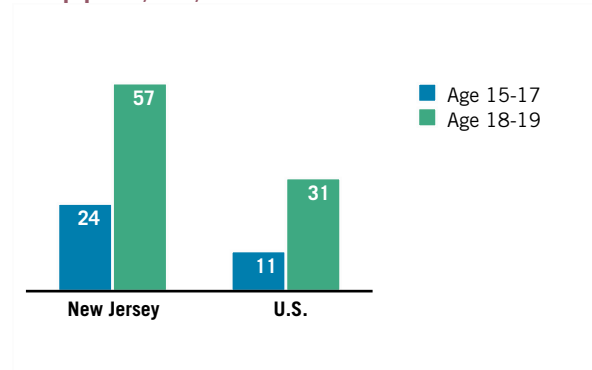
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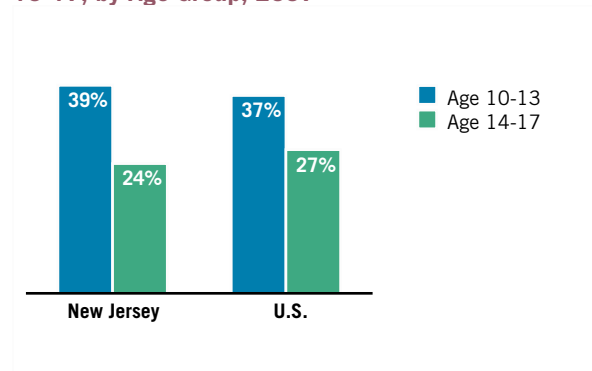
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MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

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- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
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Law and Legislation

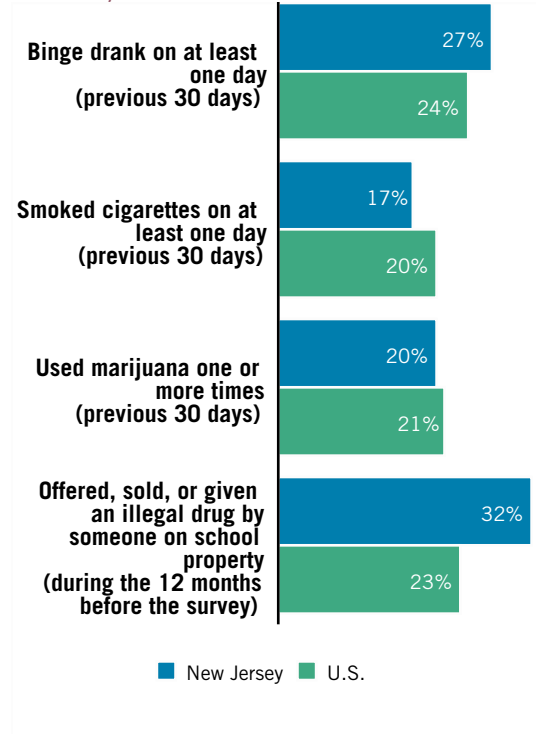
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State Choices to Promote Quality

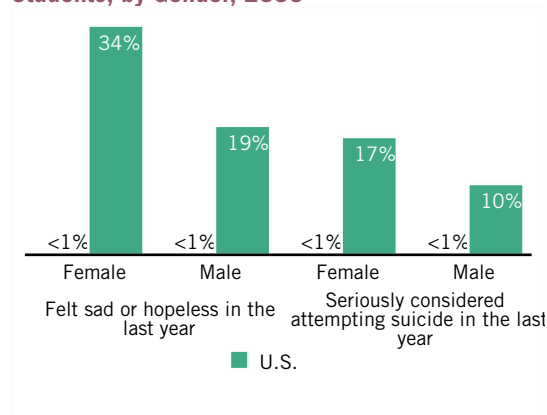
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- School social workers [2006]²⁵
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Self-reported Substance Use Among High School Students, 2009²⁷



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Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
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VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

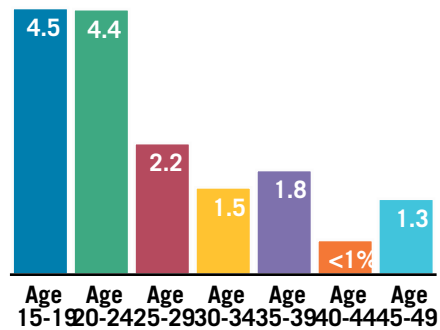
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
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- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

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 - Require learner's entry age at 16 [2010]³⁵
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 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]²⁴³
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- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]²⁴⁴

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
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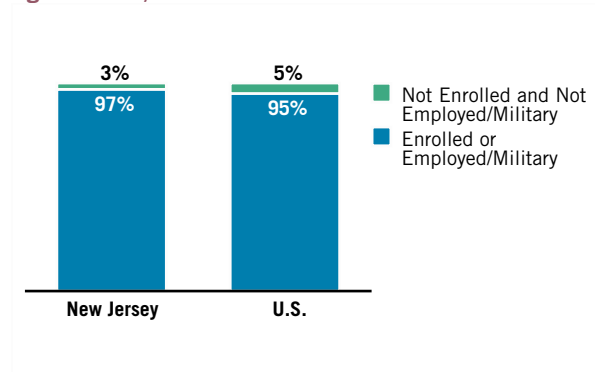
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
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- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





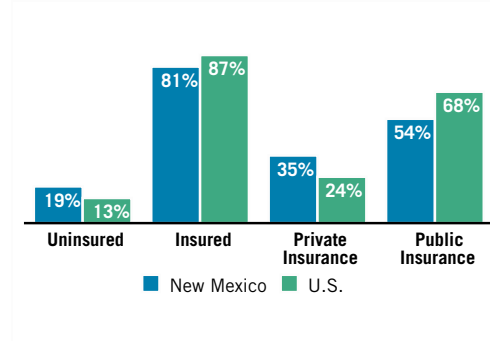
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



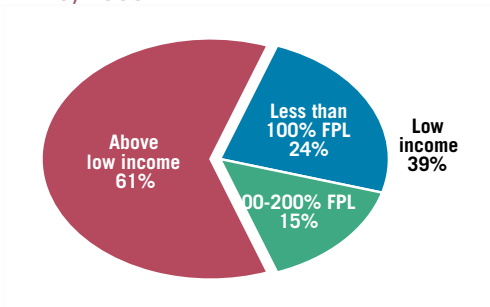
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Updated: June 1, 2011

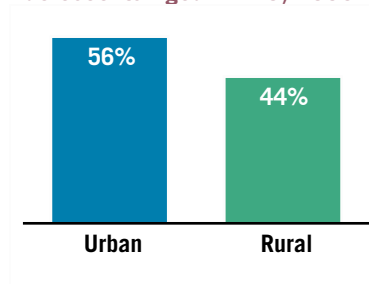
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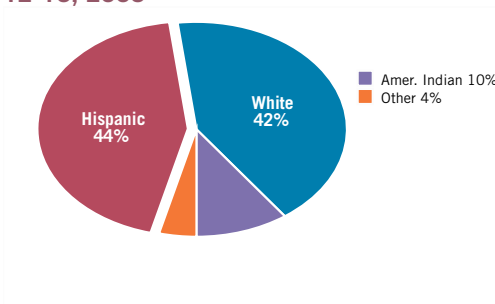
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

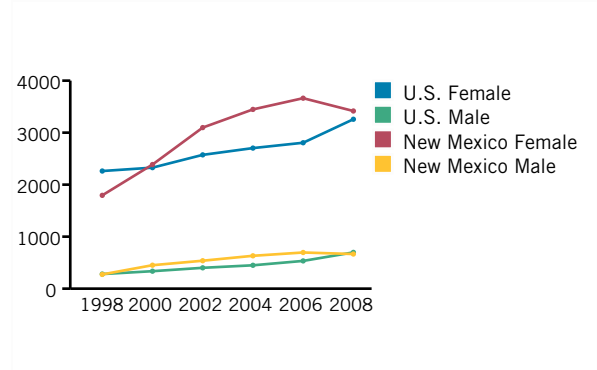
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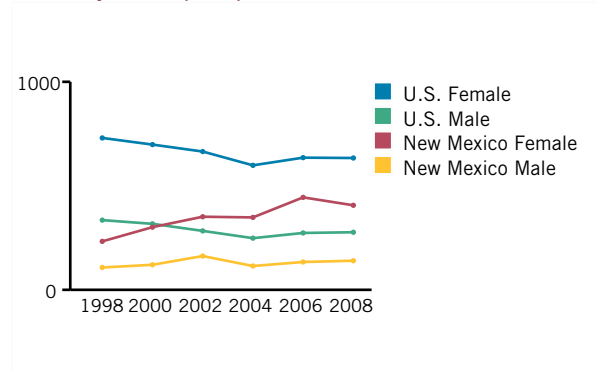
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Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

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- Contraceptive and family planning services [2010]¹⁴
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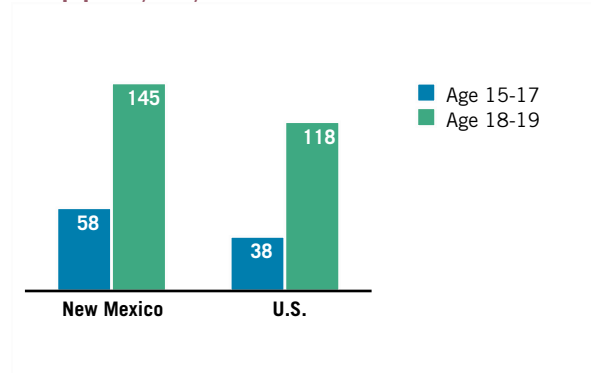
Services in Schools

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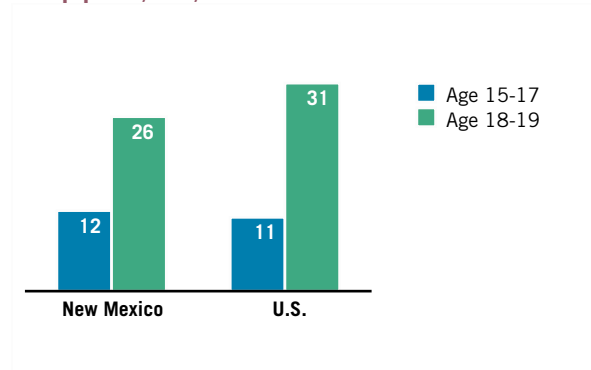
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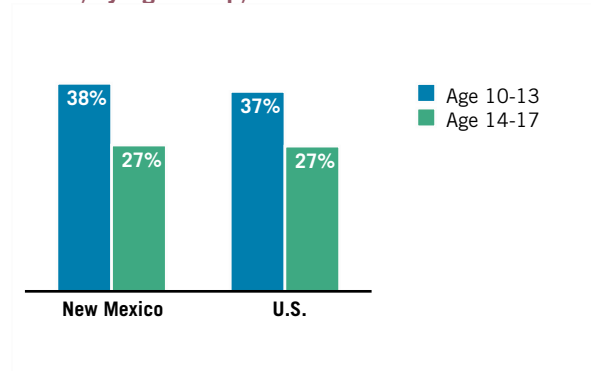
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MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

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Law and Legislation

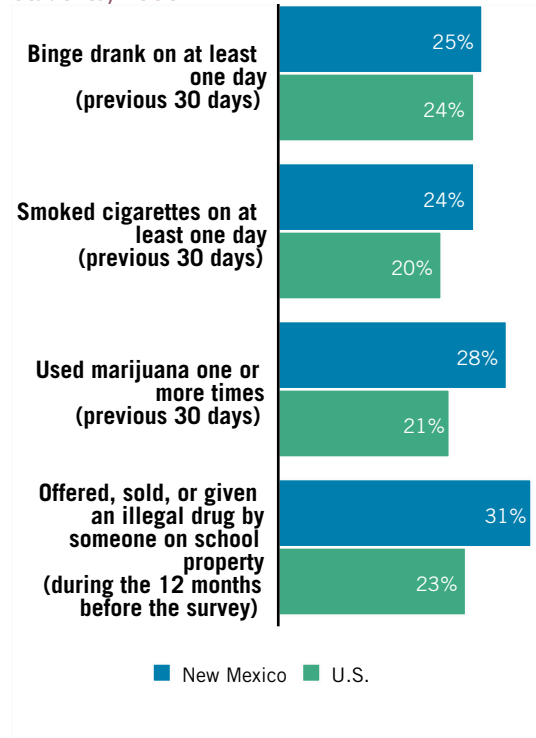
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State Choices to Promote Quality

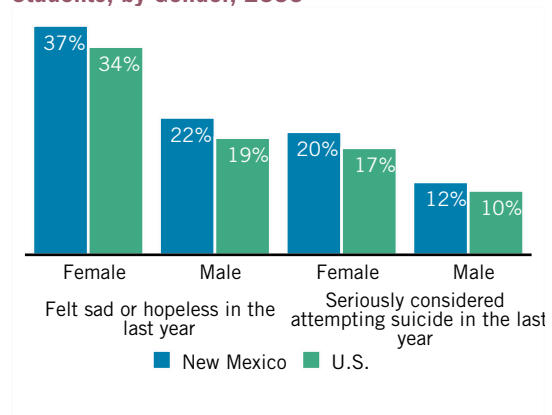
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VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

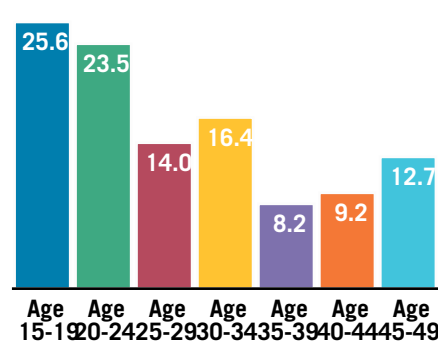
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁴⁹
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- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]²⁵⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

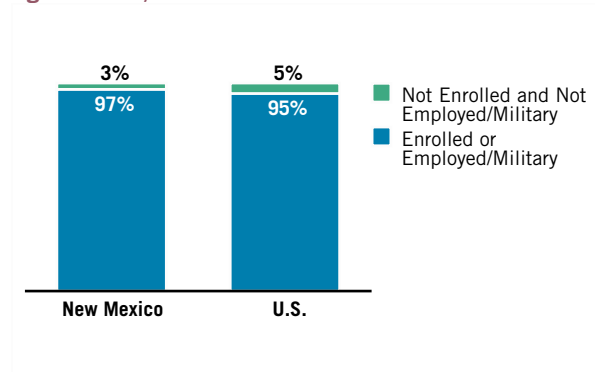
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

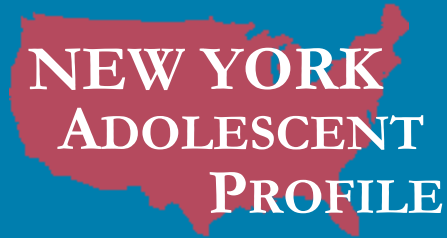
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





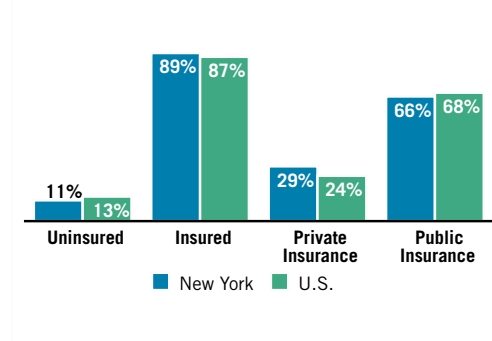
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



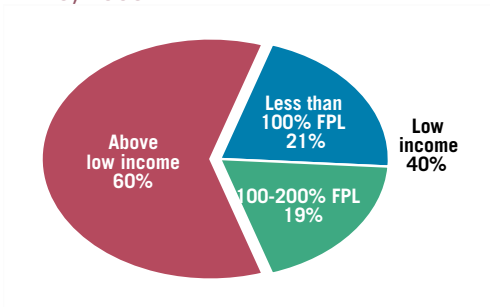
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on New York's 1,706,505 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

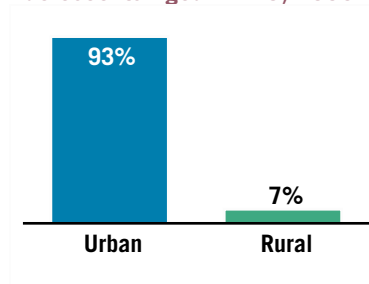
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



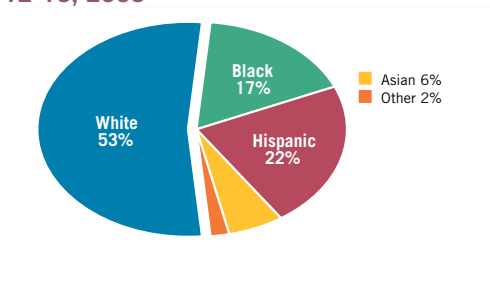
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

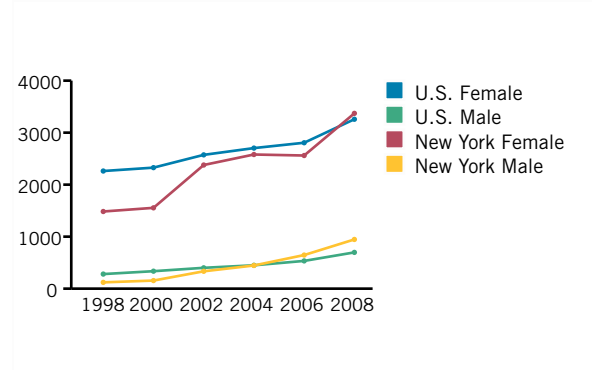
- Medicaid [2009]¹¹¹
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

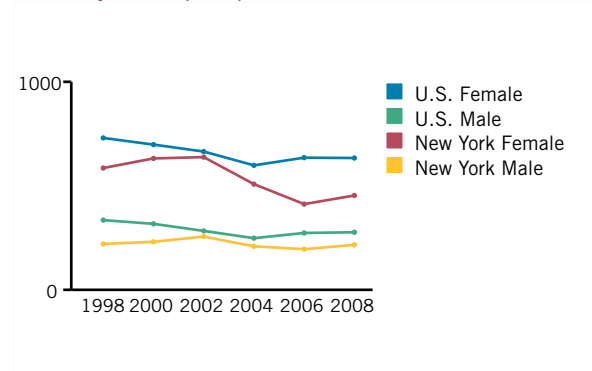
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

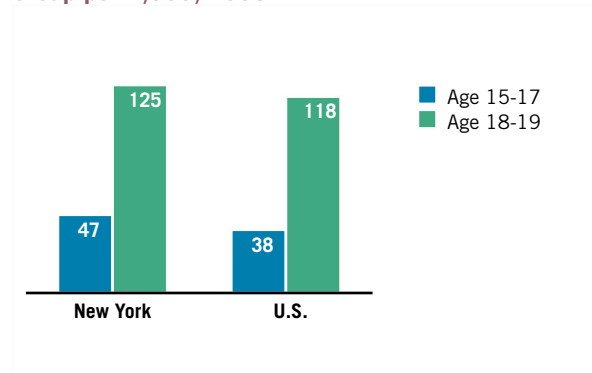
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

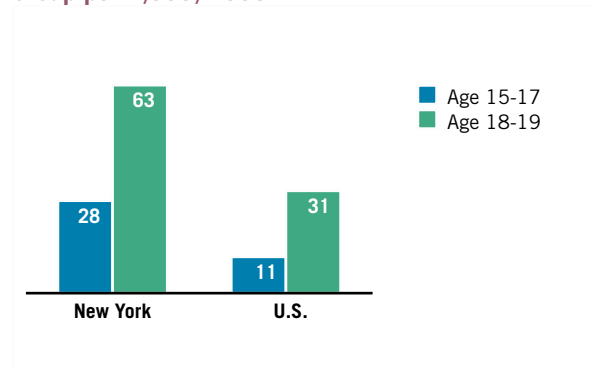
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

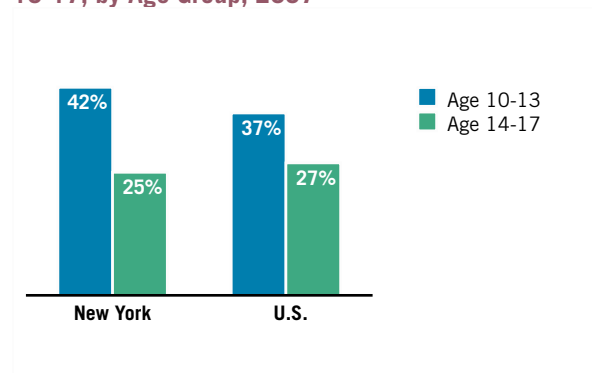
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²⁵¹

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

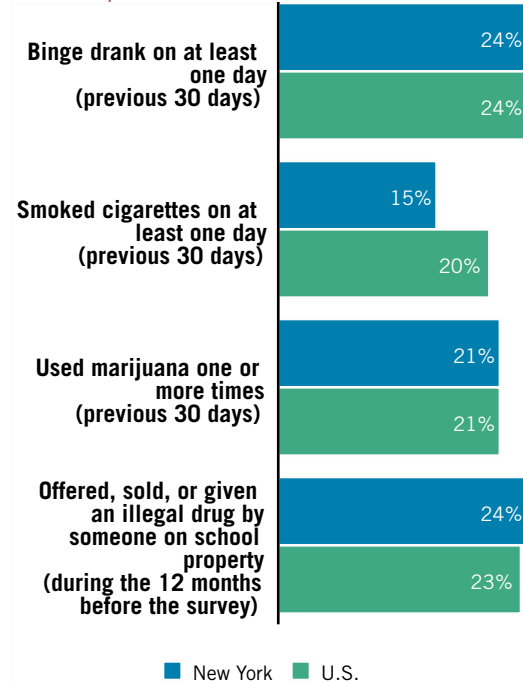
- Allow minors to consent to outpatient mental health care [2010]²⁵²
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁵²

State Choices to Promote Quality

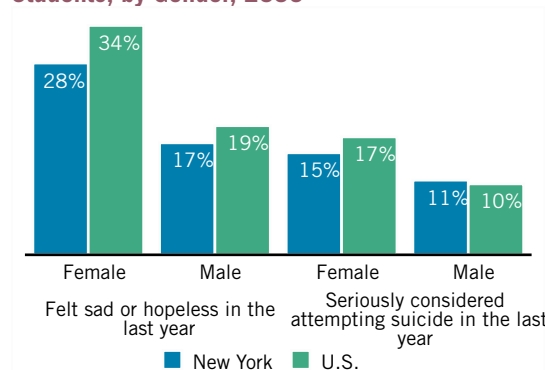
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁵³
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]¹⁶⁹
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

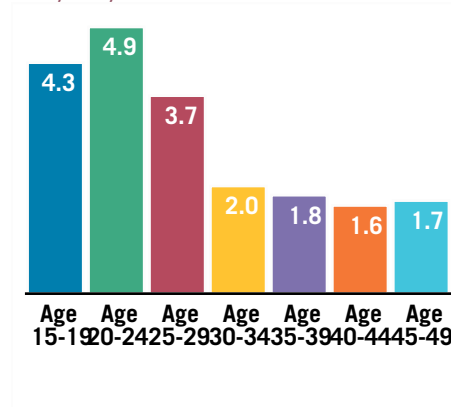
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]²⁵⁴
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

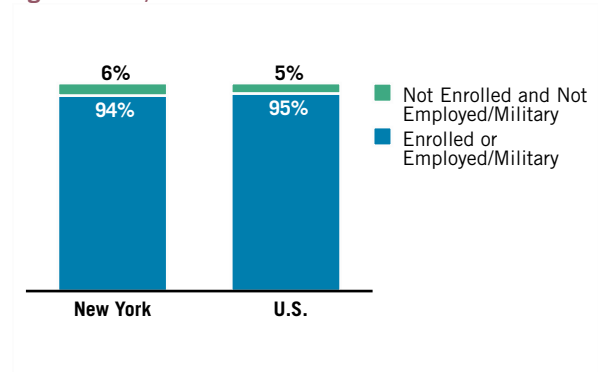
YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

Transition to Adulthood

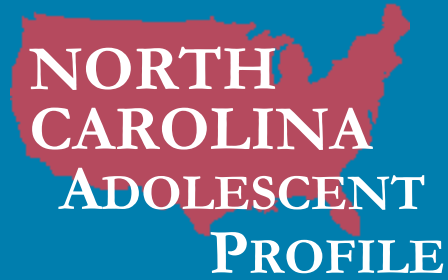
- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴



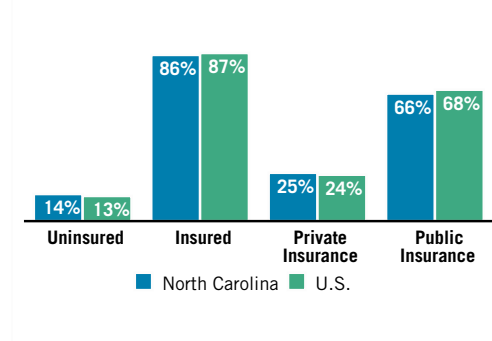
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



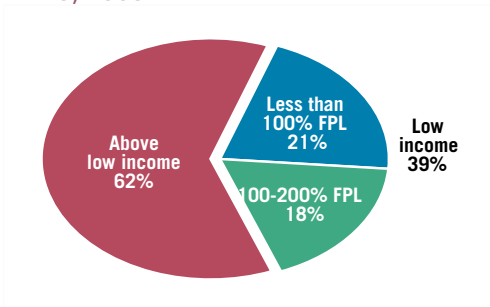
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on North Carolina's 811,183 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

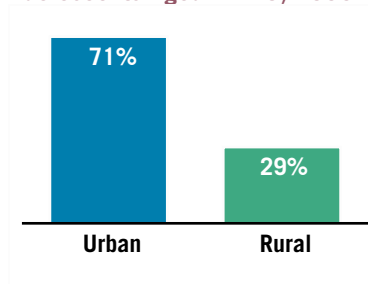
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



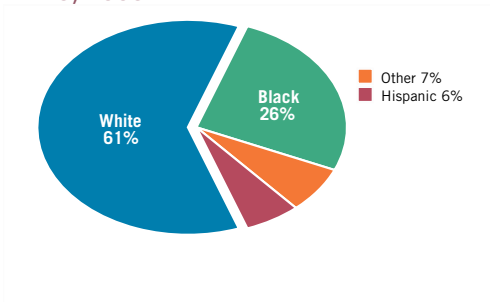
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

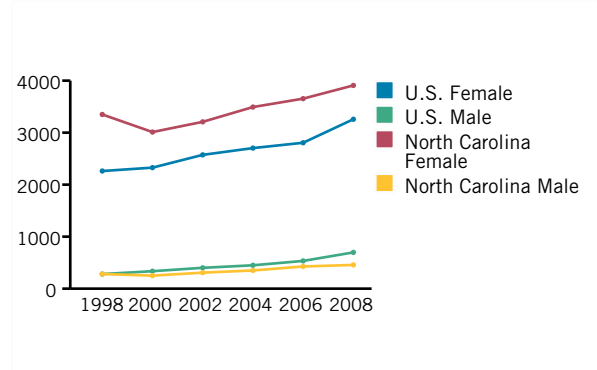
- Medicaid [2009]²⁵⁵
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

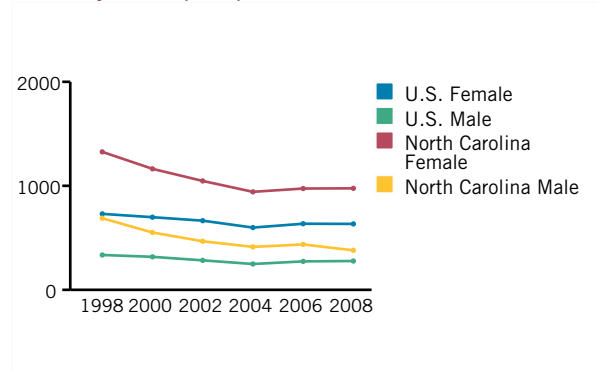
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²⁵⁶

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

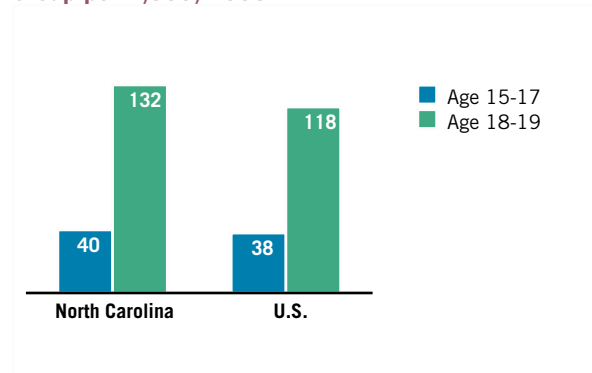
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

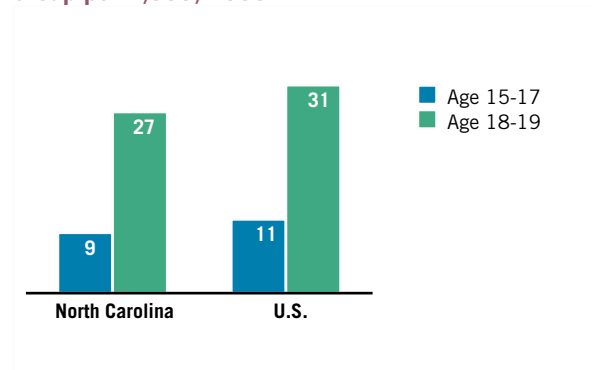
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

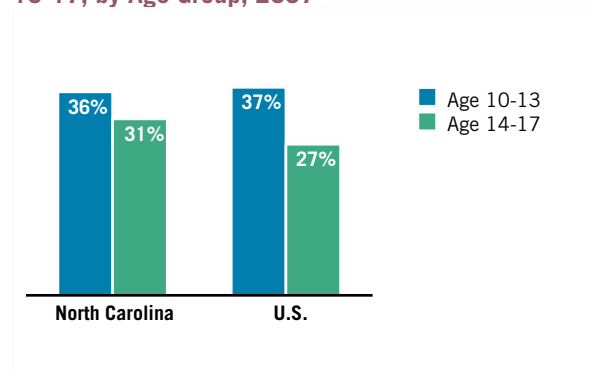
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

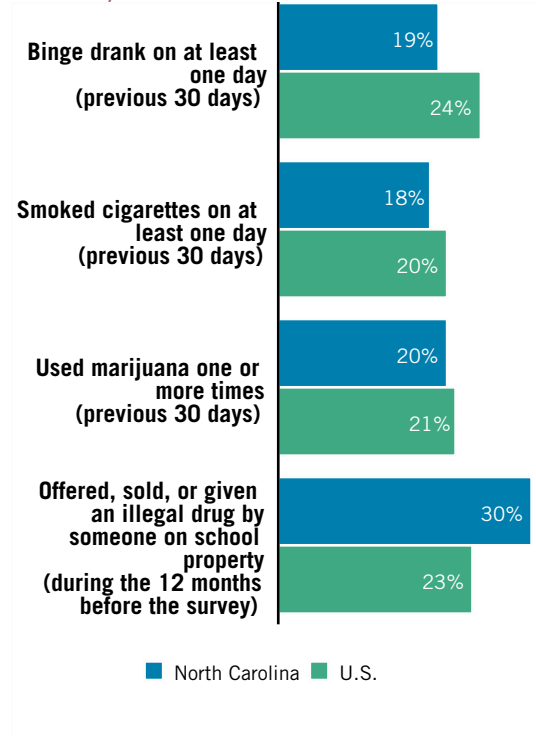
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

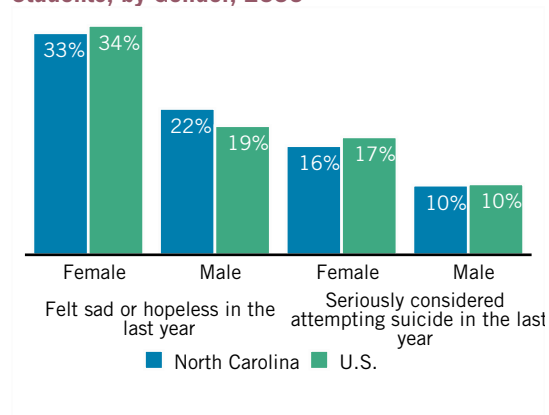
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

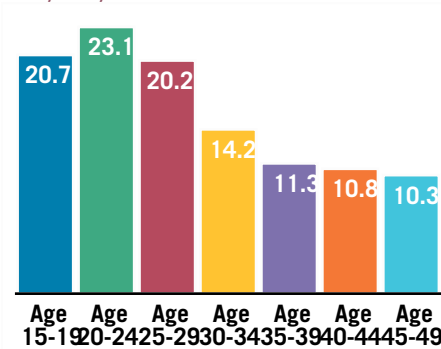
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]²¹⁹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]²⁵⁷
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

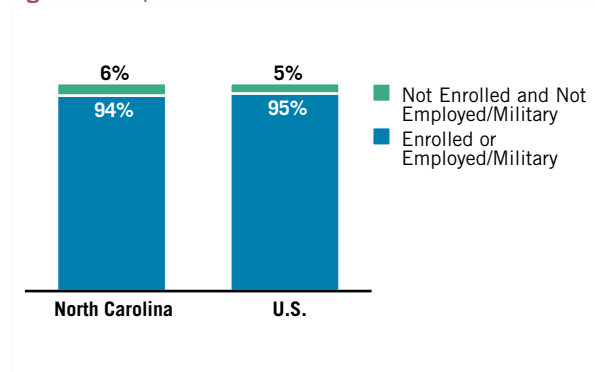
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





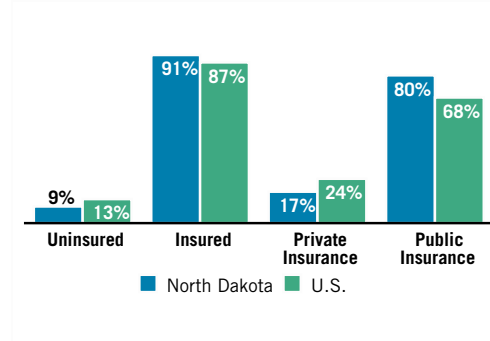
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



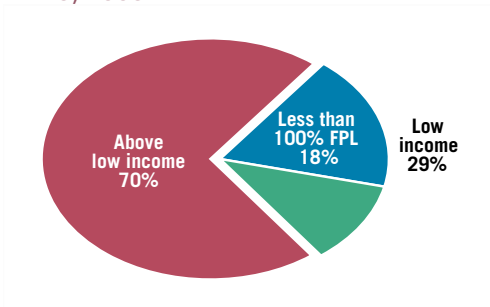
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on North Dakota's 53,527 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

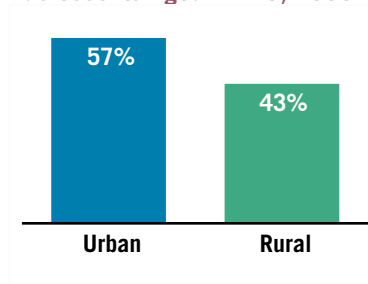
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



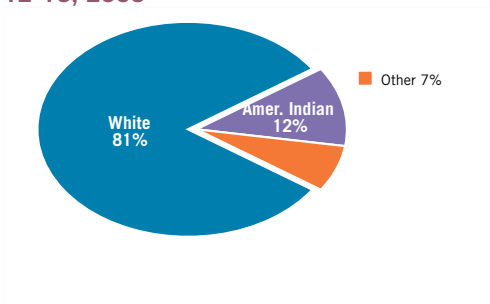
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

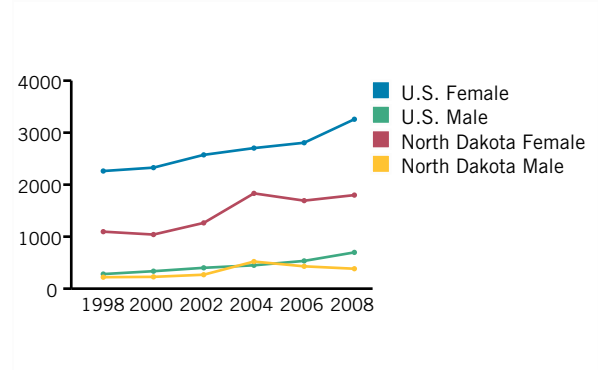
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

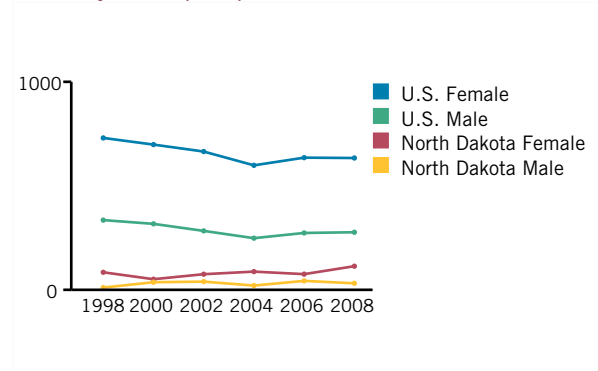
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]²⁵⁸
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]²⁵⁹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]²⁶⁰
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]²⁶⁰
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

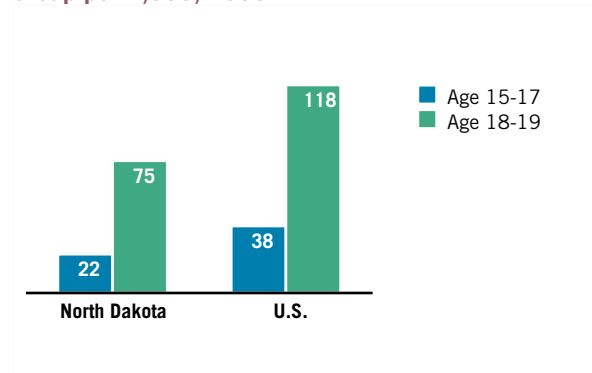
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

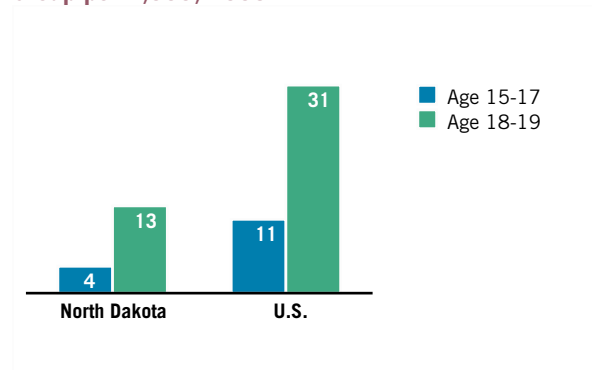
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

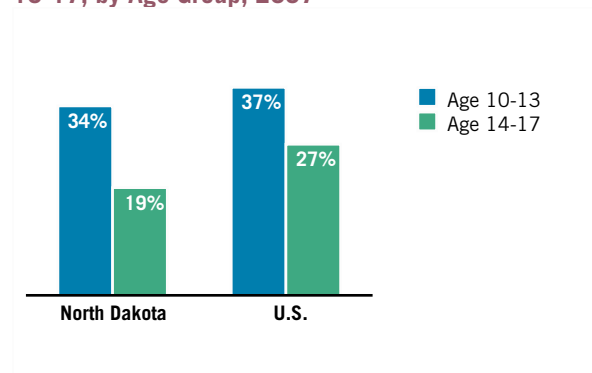
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

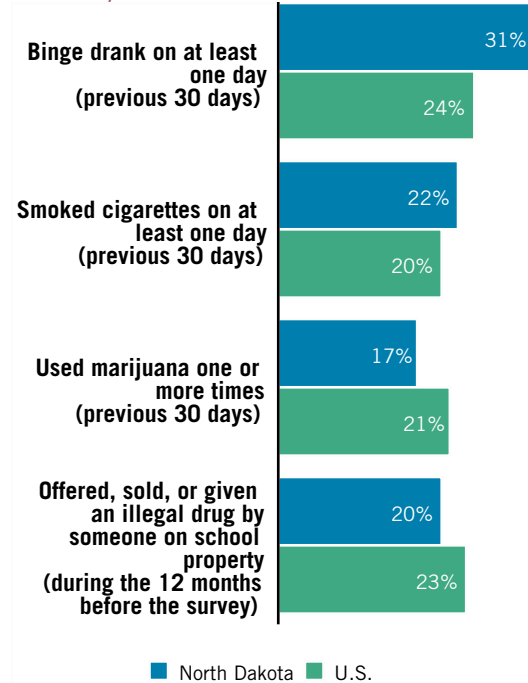
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]⁵⁶

State Choices to Promote Quality

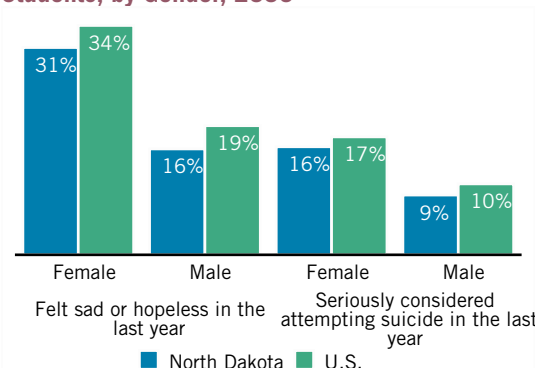
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

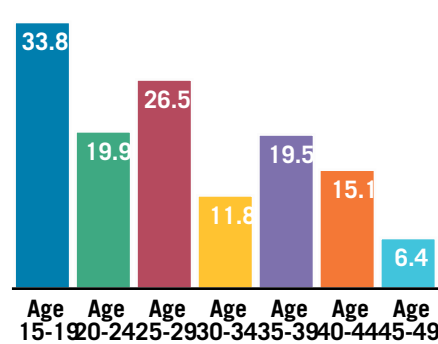
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶¹

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]²⁶²
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]²⁶³
 - Allow minors to petition for protection orders [2009]²⁶⁴
 - Allow victims to petition for restraining order against a minor [2009]²⁶⁵

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

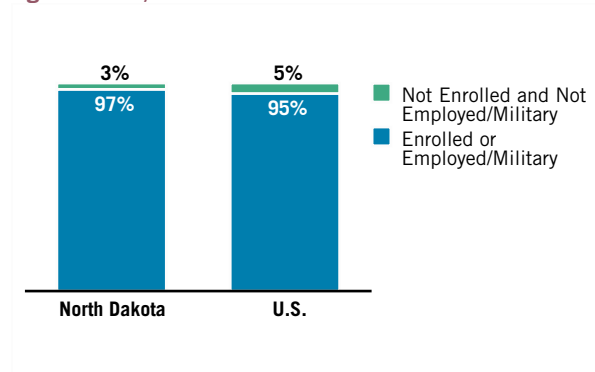
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





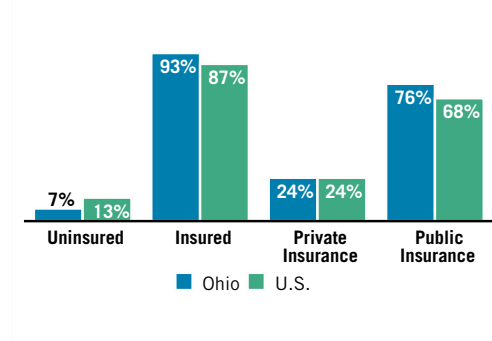
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



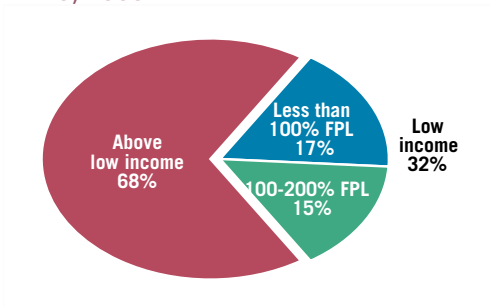
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Ohio's 1,051,262 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

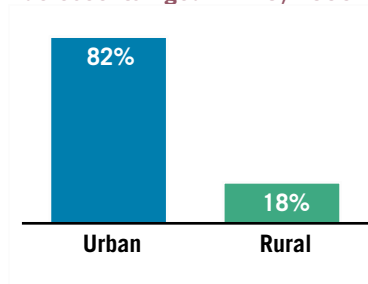
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



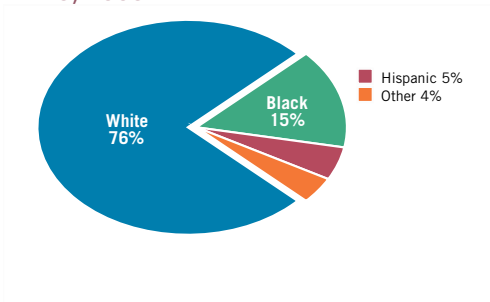
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

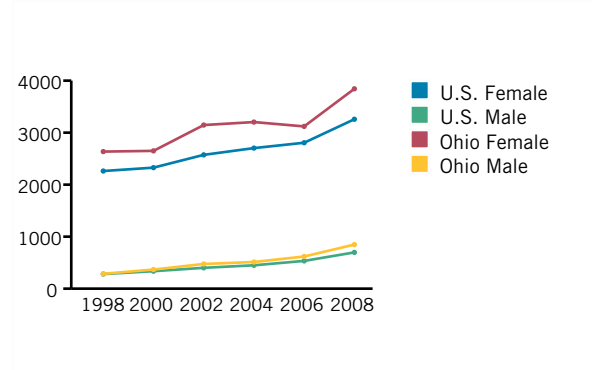
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

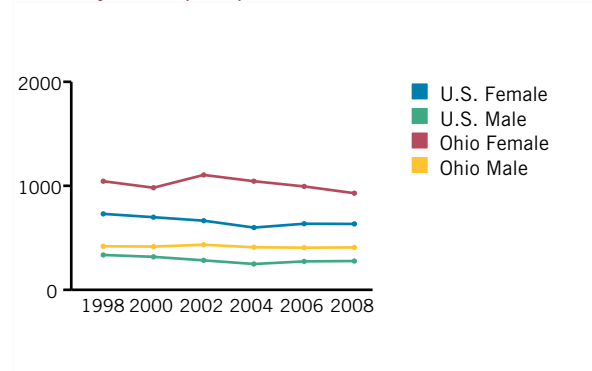
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]²²¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]¹⁸²

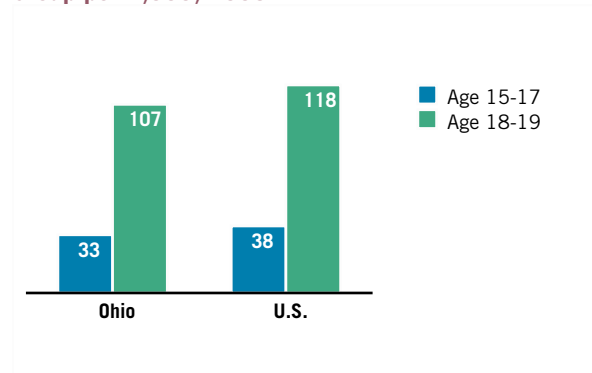
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

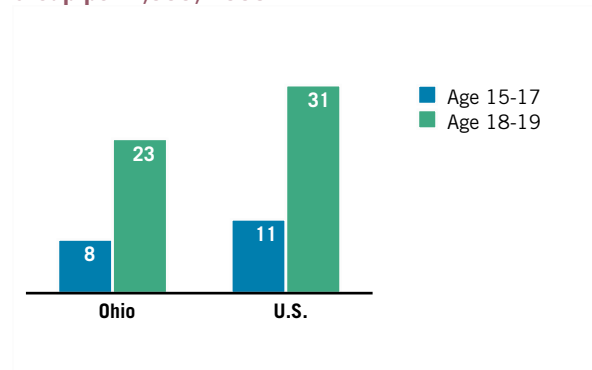
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

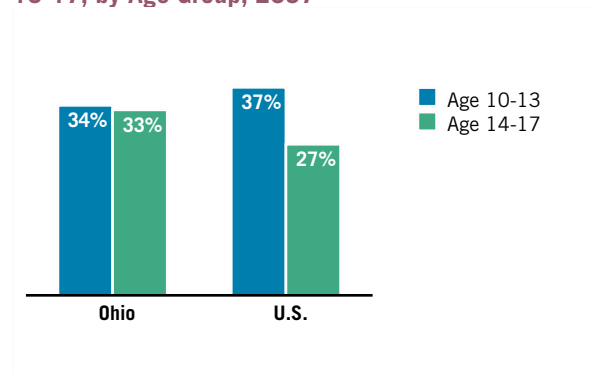
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²⁶⁶

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

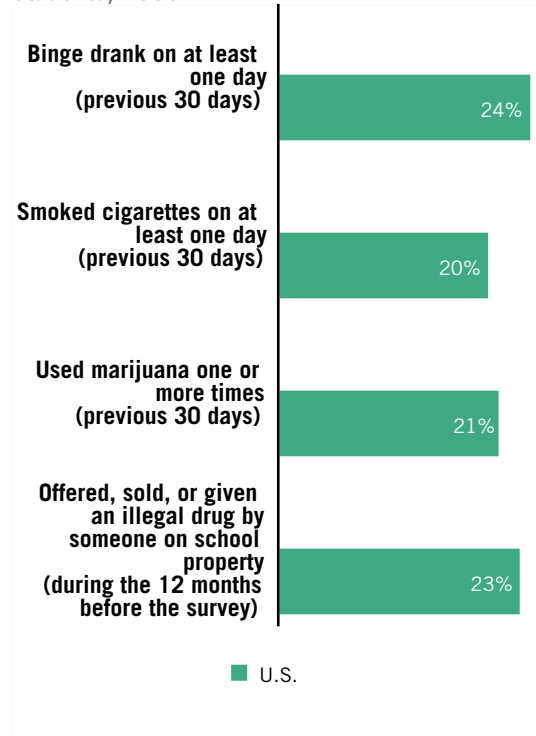
- Allow minors to consent to outpatient mental health care [2010]²⁰⁵
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

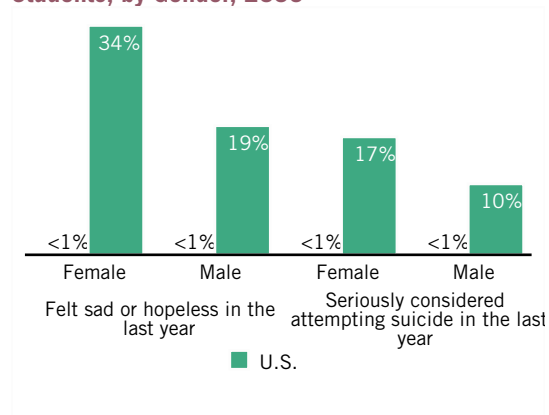
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

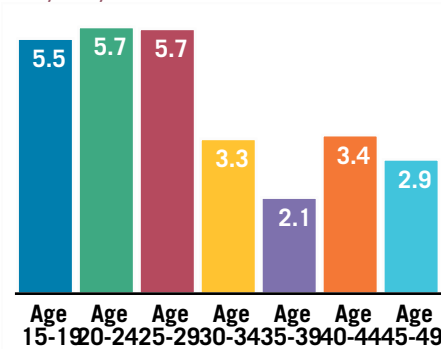
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]²⁶⁷

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹¹⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]²⁶⁷

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]²⁶⁸

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

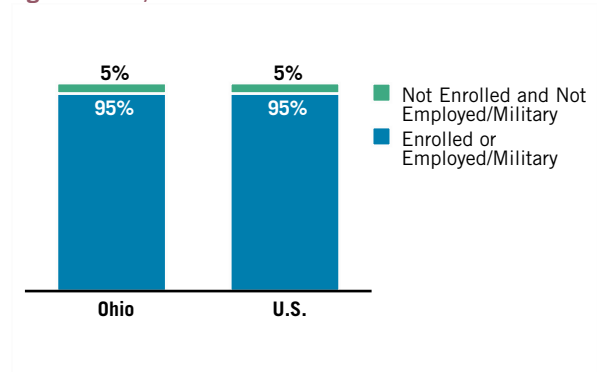
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]²⁶⁹

Law and Legislation

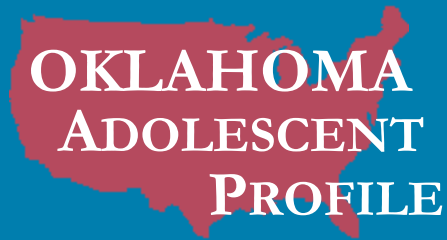
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





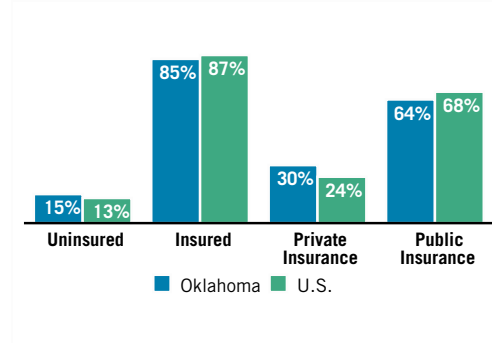
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



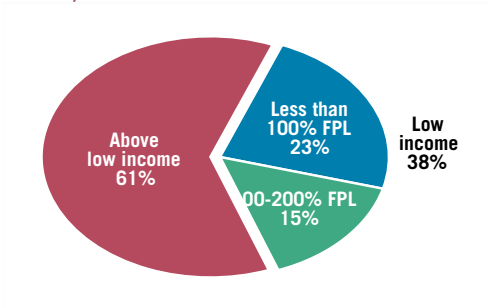
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Updated: June 1, 2011

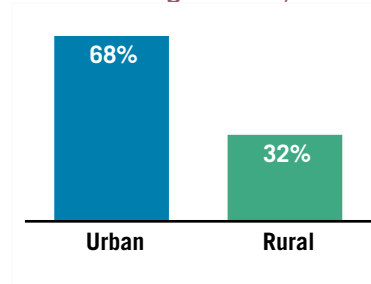
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



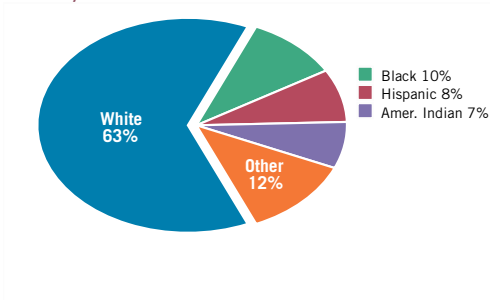
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

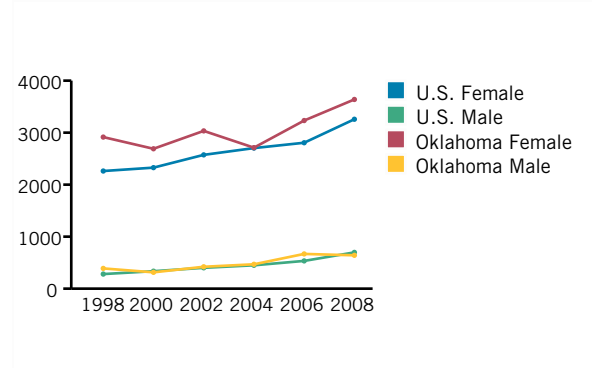
- Medicaid [2009]²⁷⁰
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]¹⁵⁴
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁷¹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]²⁷²
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

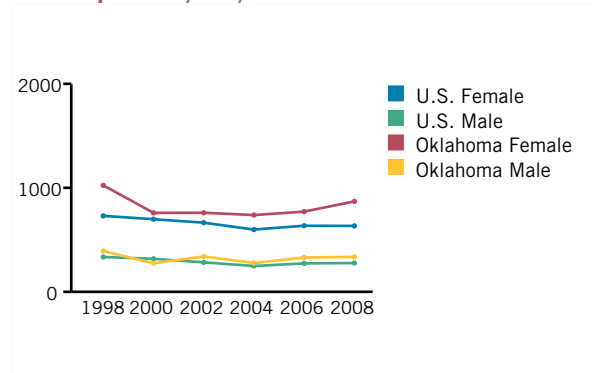
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]²⁷³
- Contraceptive and family planning services [2010]²⁷⁴
- HIV and STI prevention and treatment services [2010]²⁷³
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]²⁰⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵⁸
- 4 Screenings for children 15-18 years [2009]¹⁵⁸
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]⁹⁷
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]¹⁸²

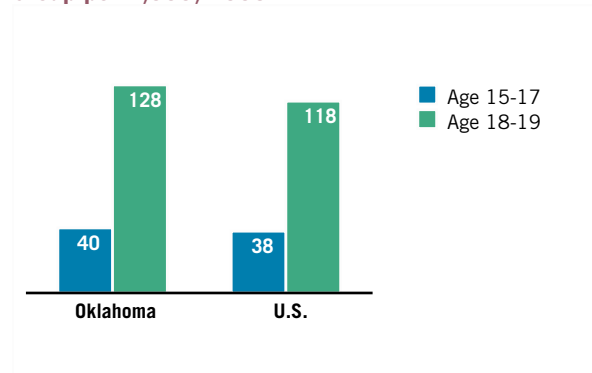
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

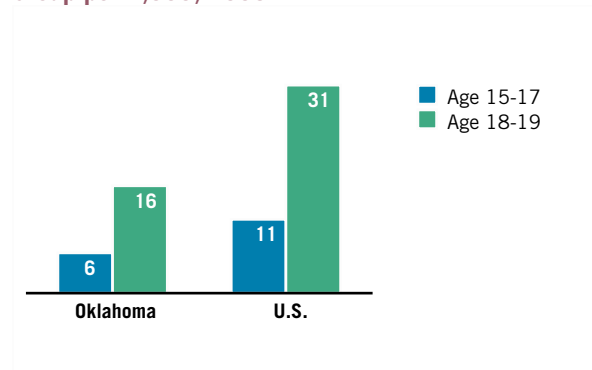
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

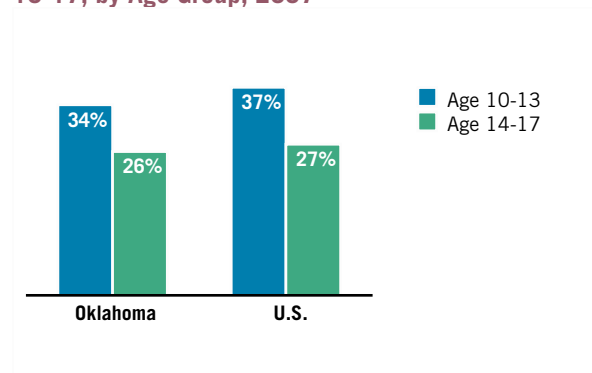
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]²⁷⁵
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

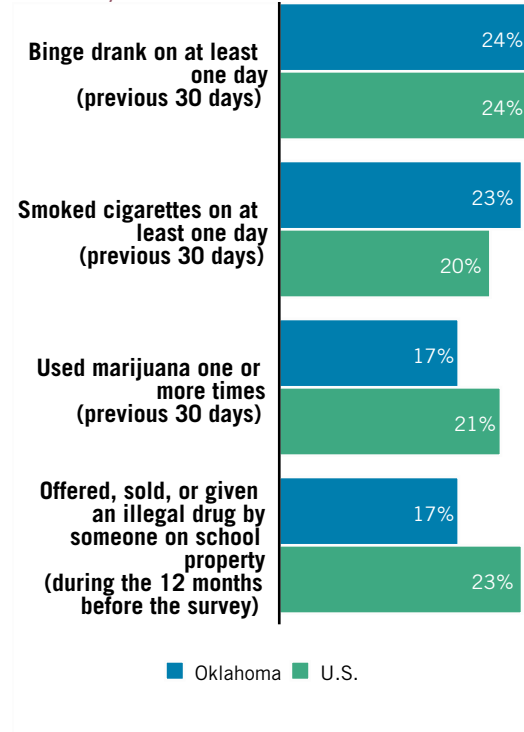
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁷⁶

State Choices to Promote Quality

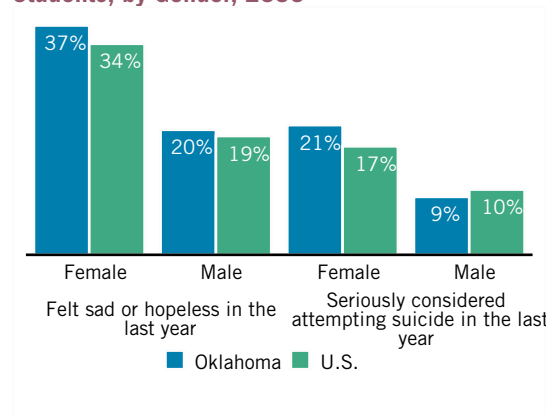
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁷⁷
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁷⁸

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

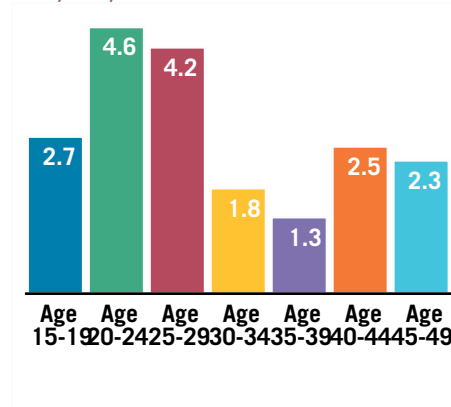
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]²⁷⁹
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁷⁸

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]¹⁸⁵
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]²⁸⁰
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]²⁸¹
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]²¹²
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]²⁸²
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]¹⁰³

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

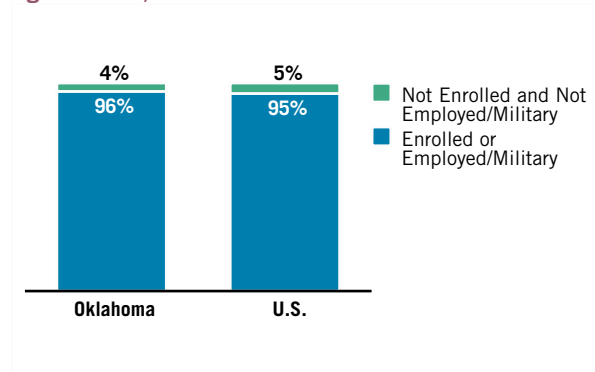
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]²⁸³
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

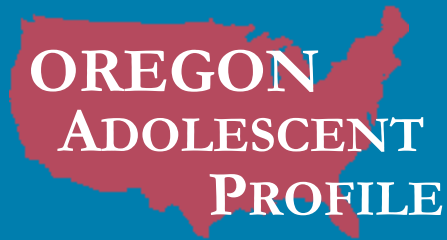
- Have a legislative youth advisory council or commission [2009]²⁸⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





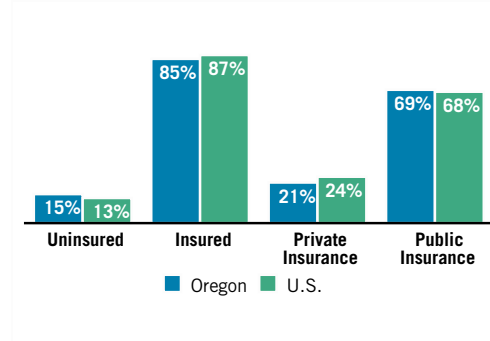
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



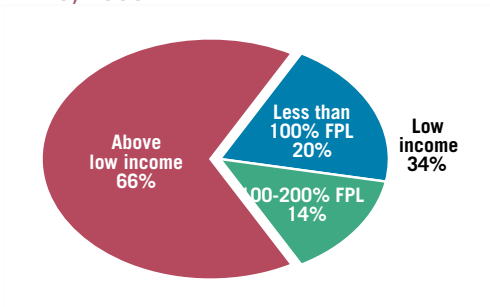
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Oregon's 329,620 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

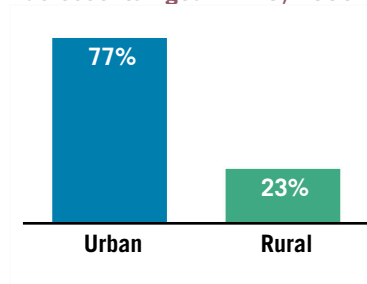
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



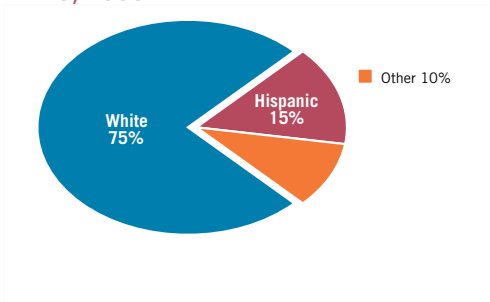
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

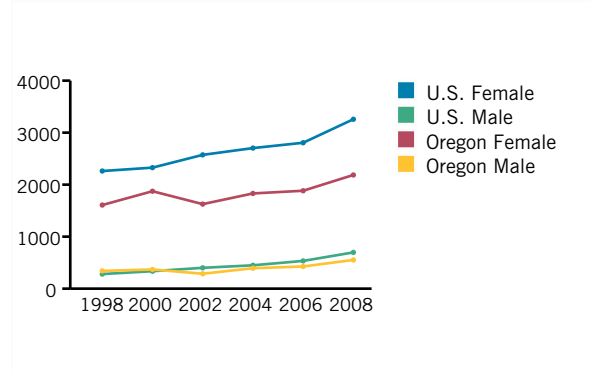
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁸⁵
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁹²

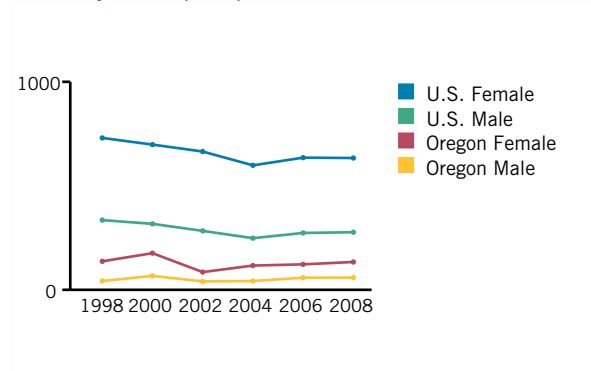
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]⁹⁴

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]²⁸⁶
- 4 Screenings for children 15-18 years [2009]²⁸⁶
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]²⁸⁷
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]¹⁸²

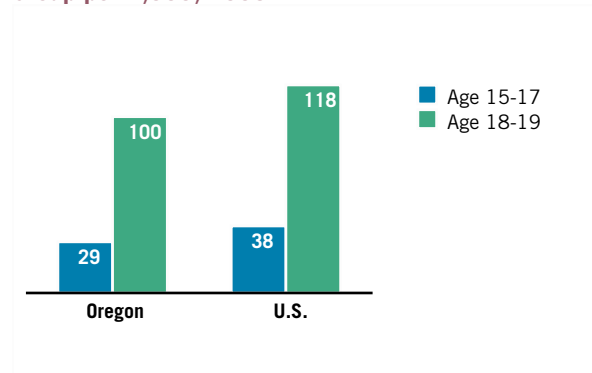
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

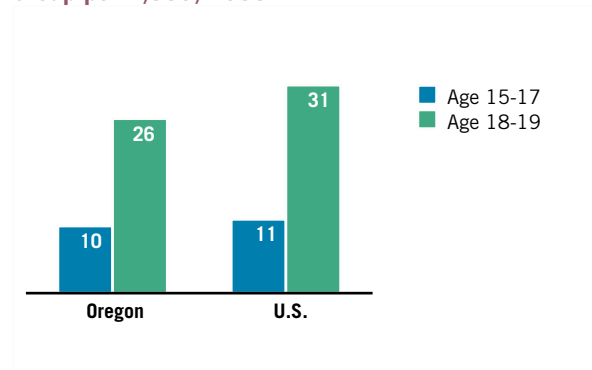
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]²⁸⁸

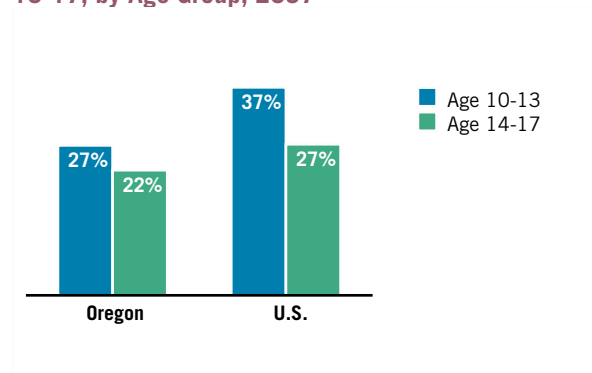
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²⁸⁹

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Crisis intervention for personal problems [2006]⁹⁹
- Suicide prevention services [2006]⁹⁴

Law and Legislation

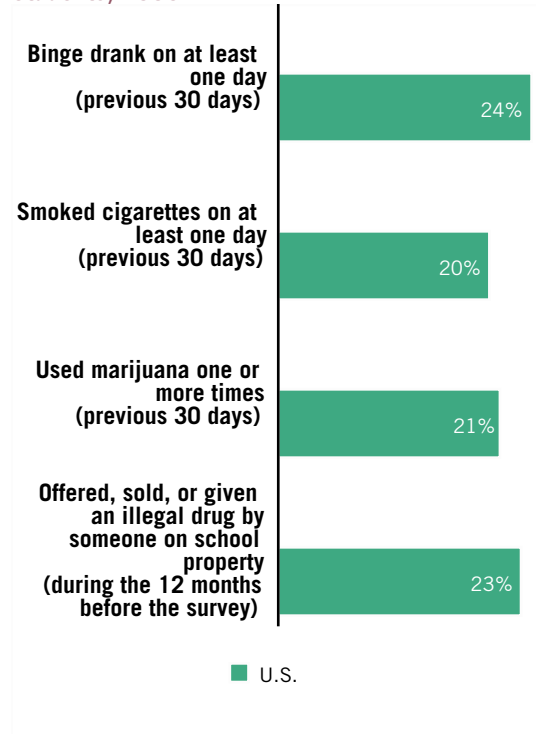
- Allow minors to consent to outpatient mental health care [2010]²⁹⁰
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State Choices to Promote Quality

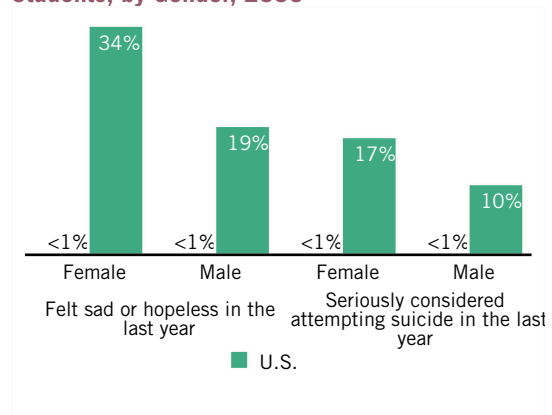
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁷⁸

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

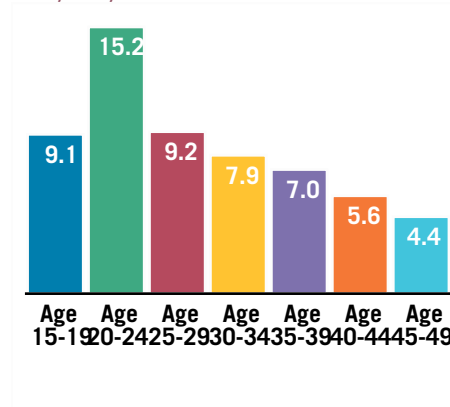
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]²⁸¹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]²⁹¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

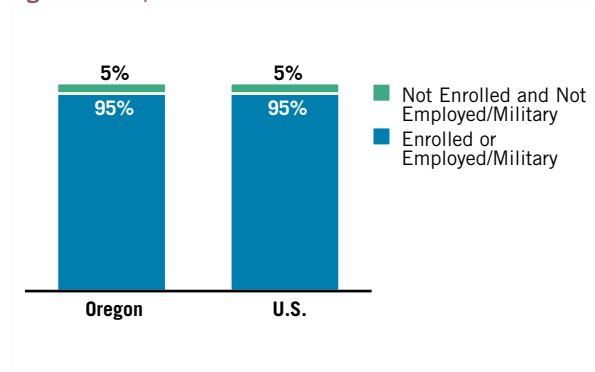
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



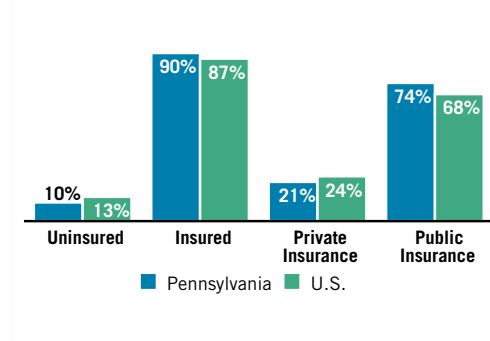


National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



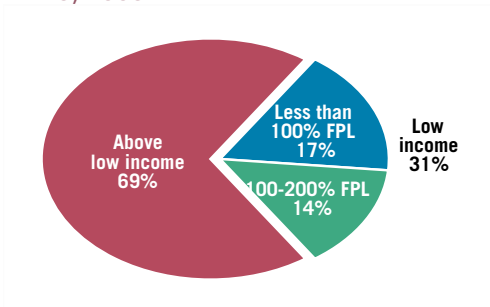
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Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹

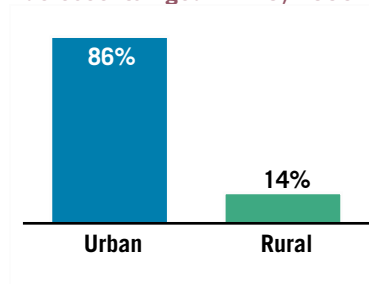


Updated: June 1, 2011

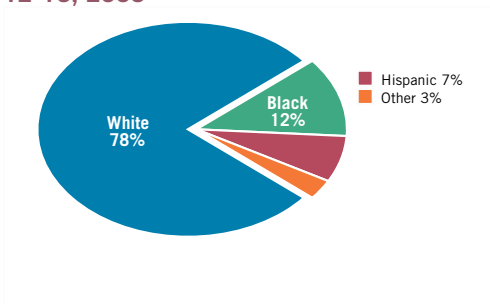
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

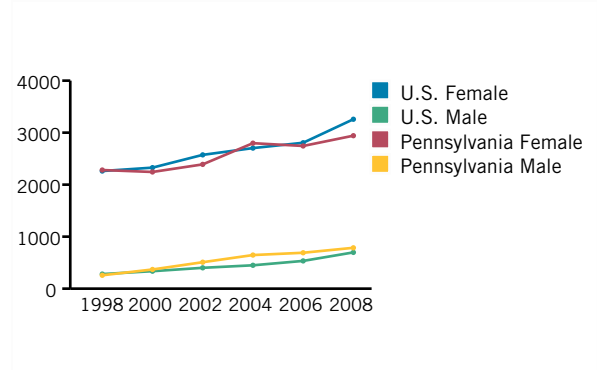
- Medicaid [2009]⁴
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- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
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- Require CHIP coverage for contraceptives [2006]⁵⁰
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- Require physical activity and fitness taught in schools [2006]⁵¹

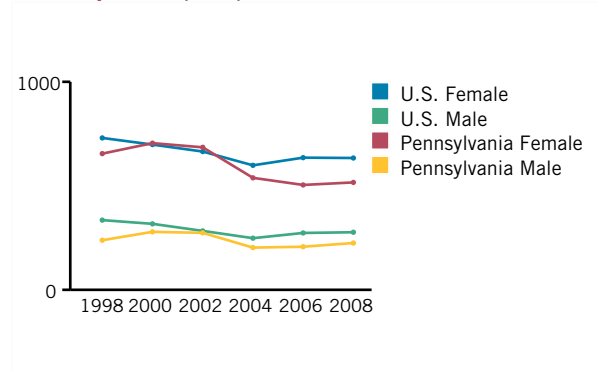
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Specify time requirements for physical education [2006]²¹

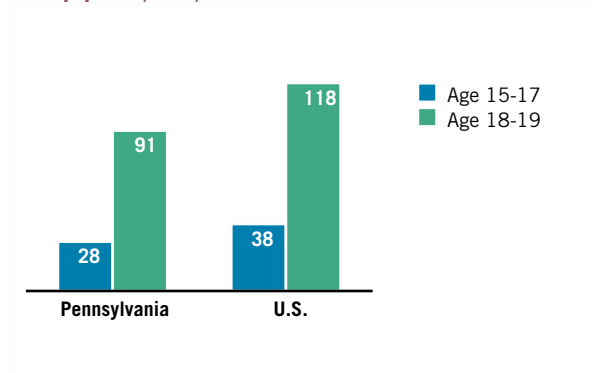
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

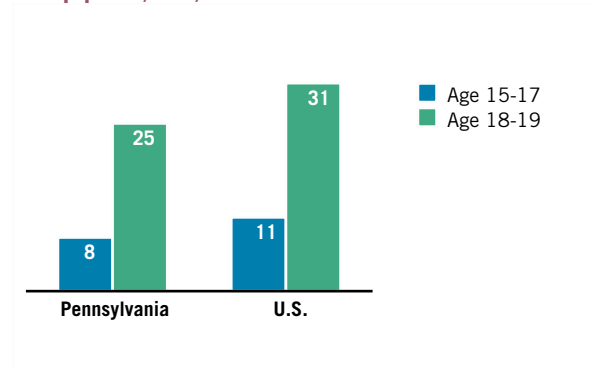
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

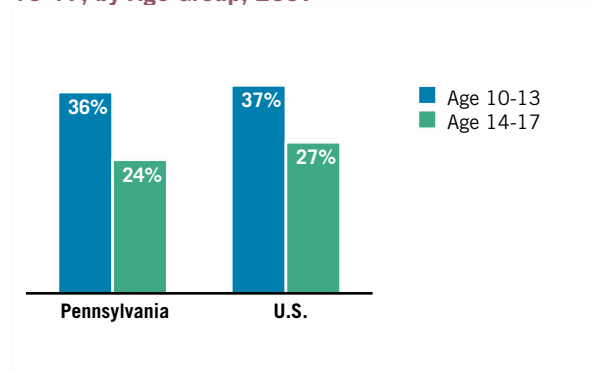
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
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Law and Legislation

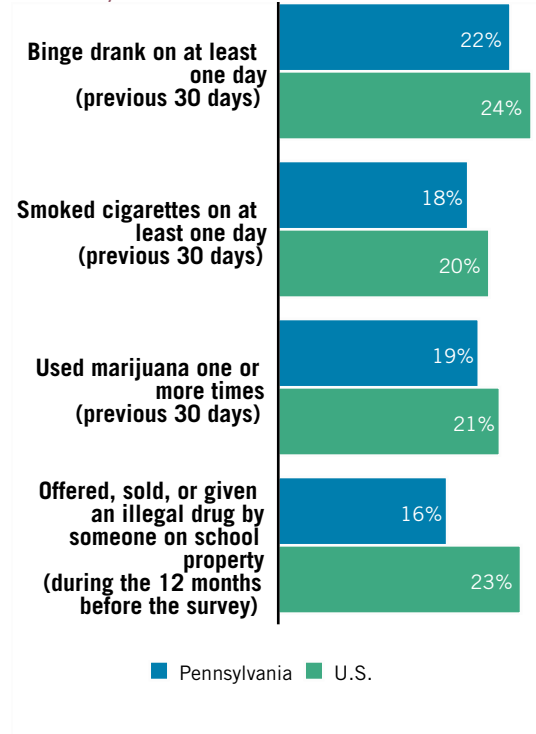
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State Choices to Promote Quality

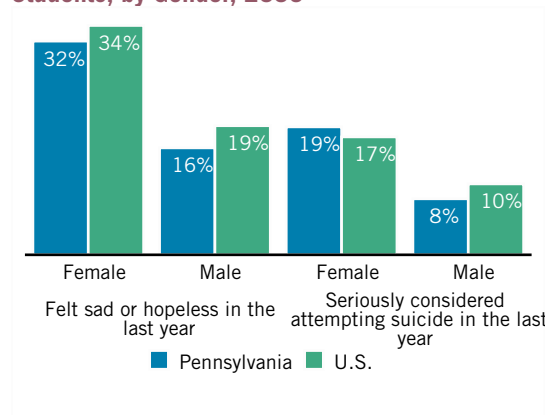
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
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- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

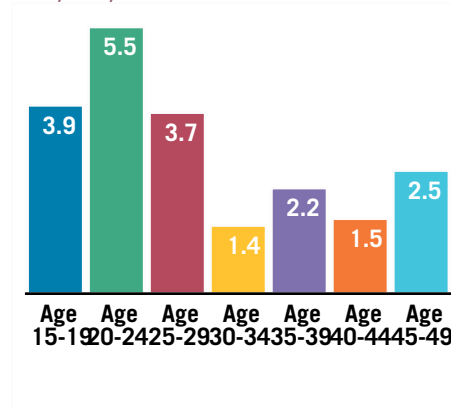
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]⁷⁸
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]¹²⁸
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

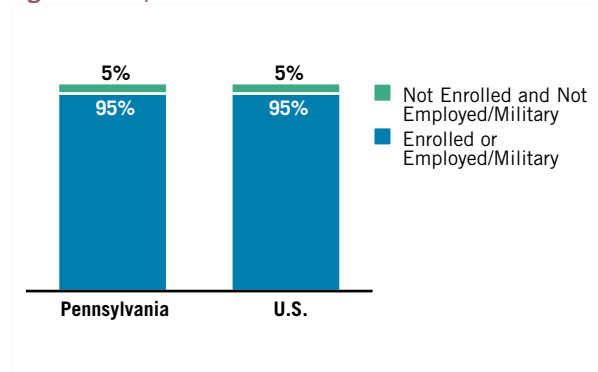
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

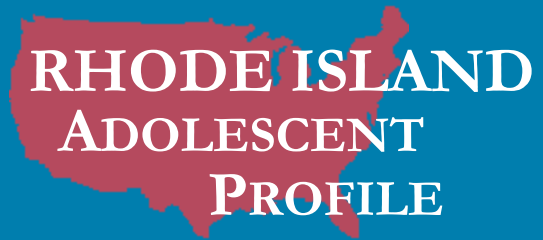
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





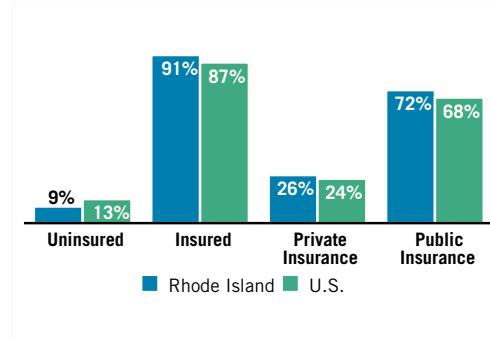
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



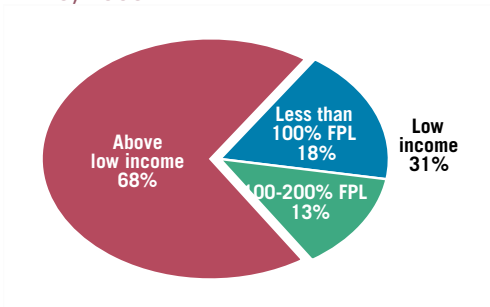
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Rhode Island's 89,600 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

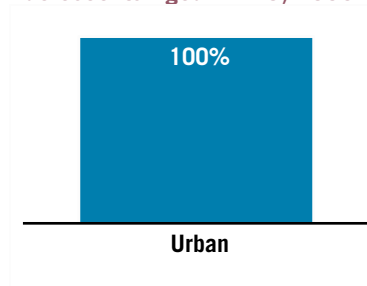
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



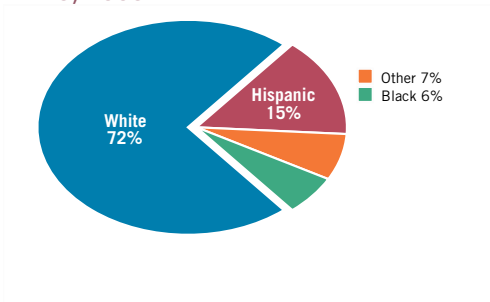
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

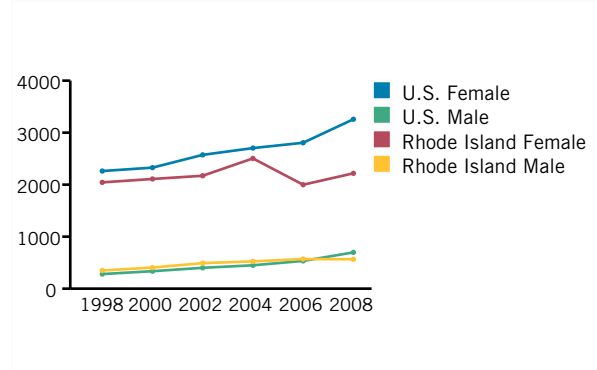
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]²⁹²
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]²⁹³
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

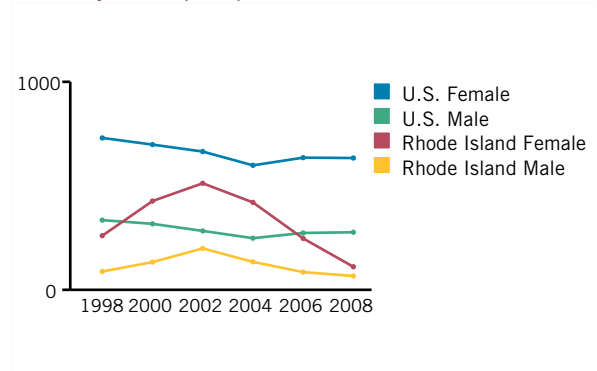
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]²⁹⁴
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁵⁷
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]⁹⁷
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]¹⁵⁹
- Specify time requirements for physical education [2006]²¹

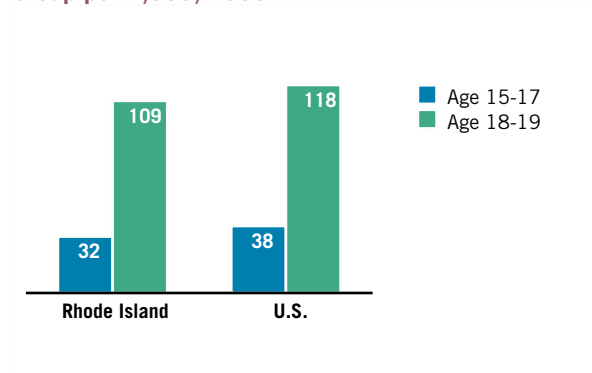
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

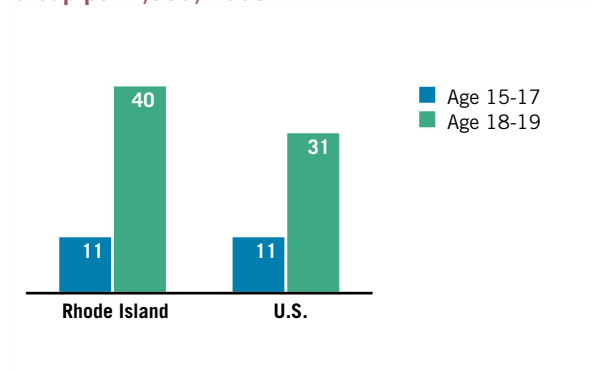
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

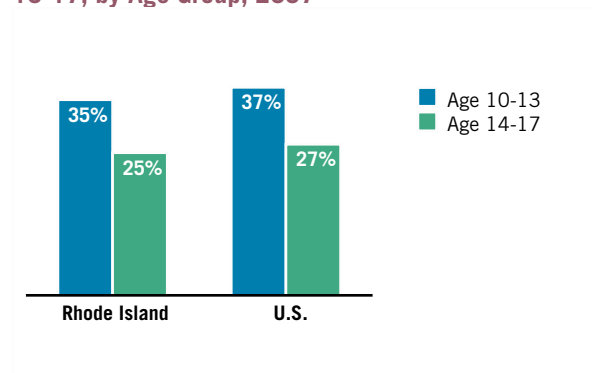
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]²⁹⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
Personal communication from the state indicates that this policy is in place, as of October 2010.
- Crisis intervention for personal problems [2006]²⁹⁶
- Suicide prevention services [2006]²⁹⁷

Law and Legislation

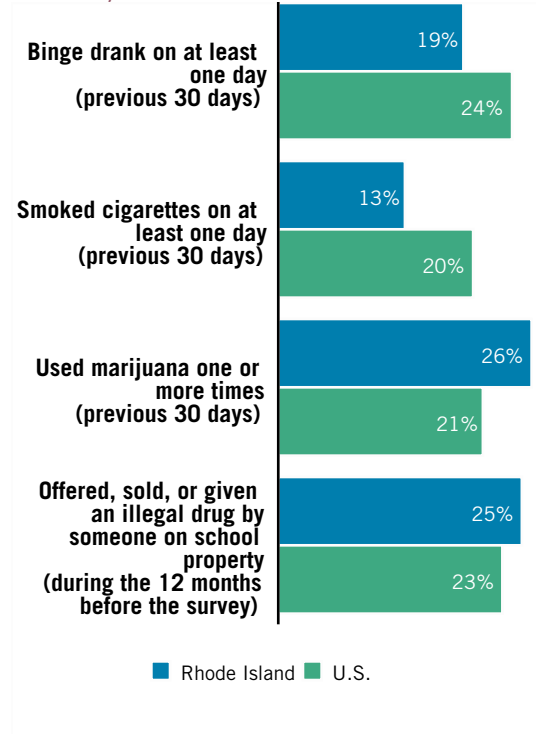
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁹⁸

State Choices to Promote Quality

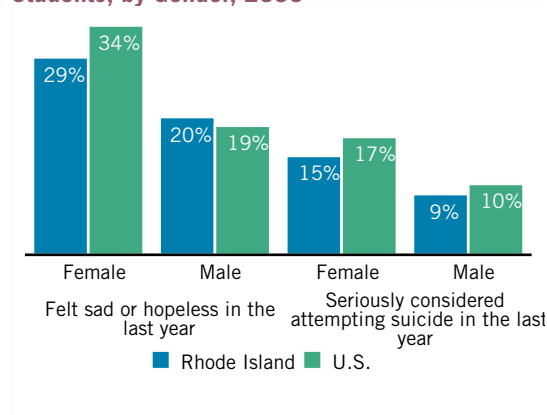
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁷⁸

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹⁹
- Require bicycle helmets on riders 17 and younger [2010]³⁰⁰
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]³⁰¹

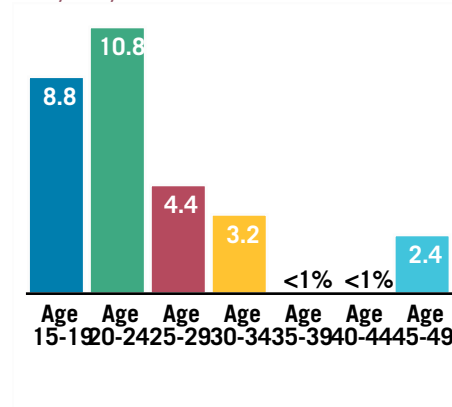
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]¹⁸⁵
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹³²
 - Require that restrictions last until age 18 [2010]²⁸⁰
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]³⁰¹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]¹⁷⁵
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]¹⁶⁴
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

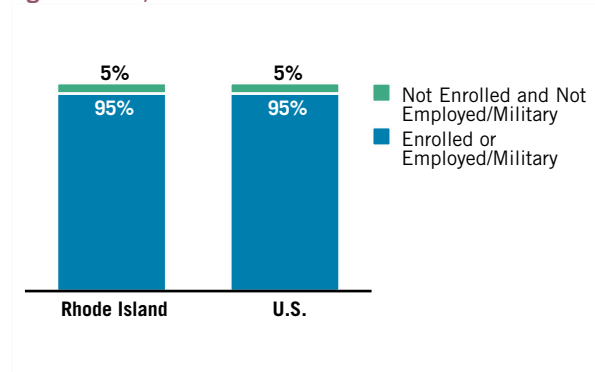
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]¹⁰³
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]¹⁰³
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

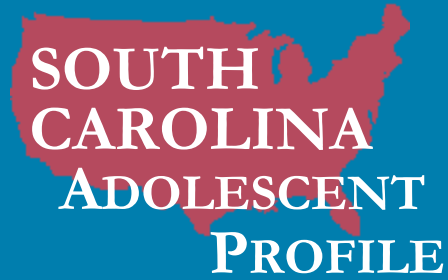
- Have a legislative youth advisory council or commission [2009]³⁰²

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





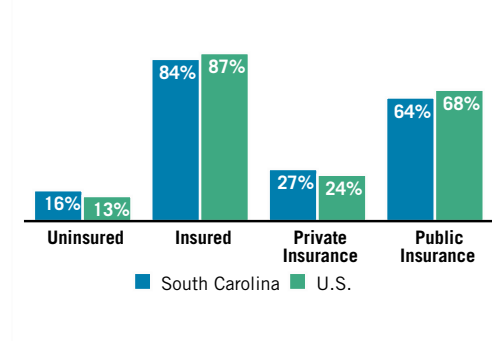
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



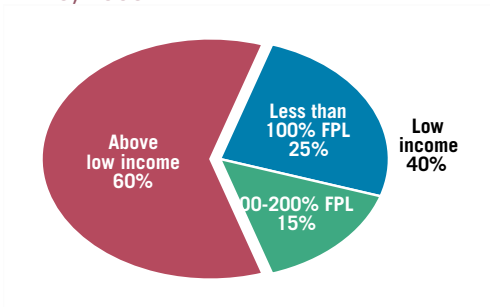
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on South Carolina's 399,447 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

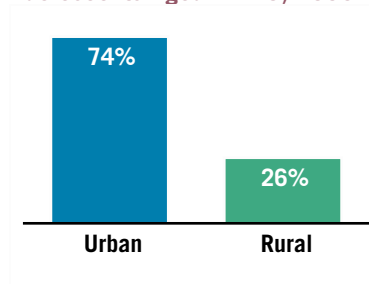
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



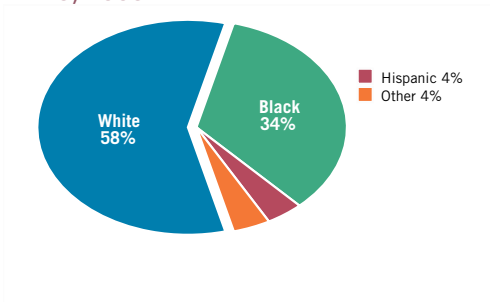
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

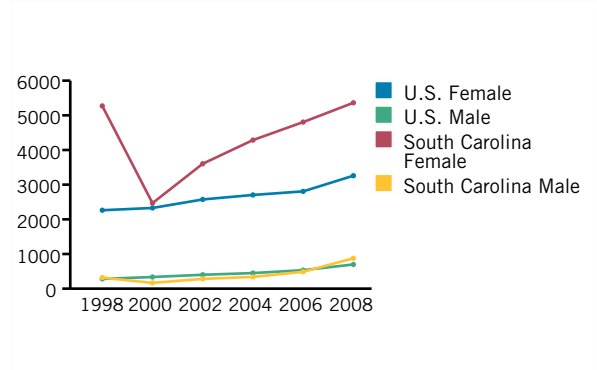
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

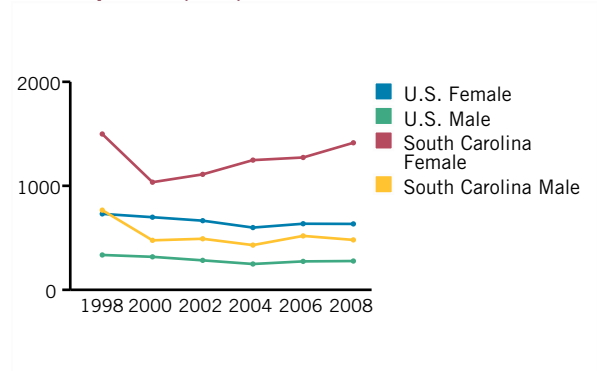
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]³⁰³
- HIV and STI prevention and treatment services [2010]³⁰⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]³⁰⁵

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

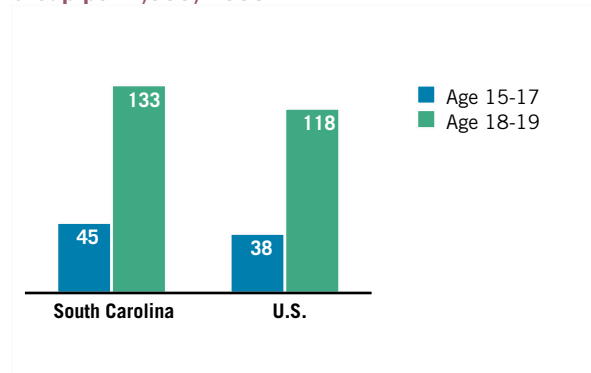
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

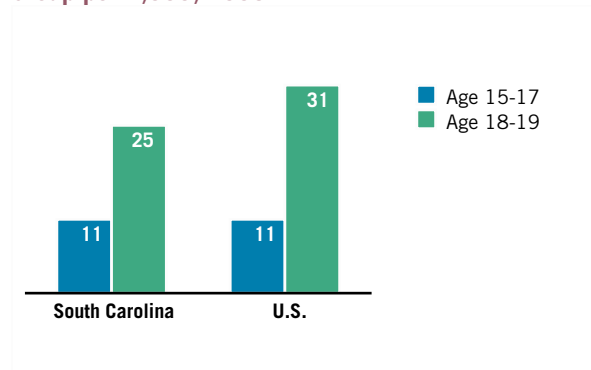
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

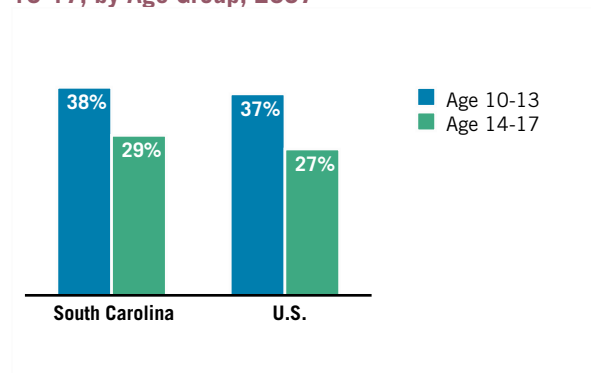
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

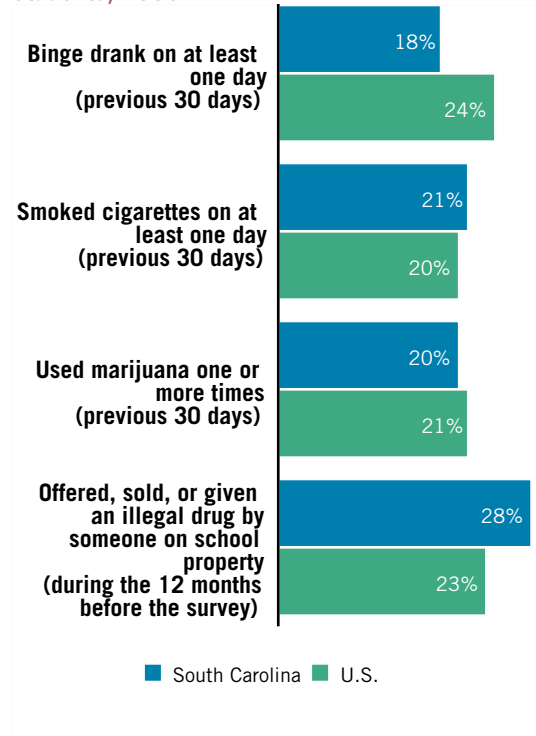
- Allow minors to consent to outpatient mental health care [2010]³⁰⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]³⁰⁶

State Choices to Promote Quality

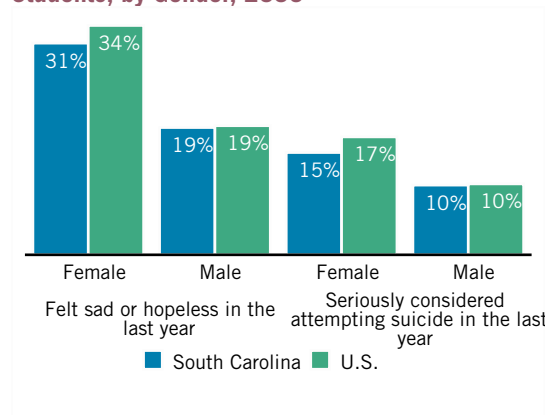
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

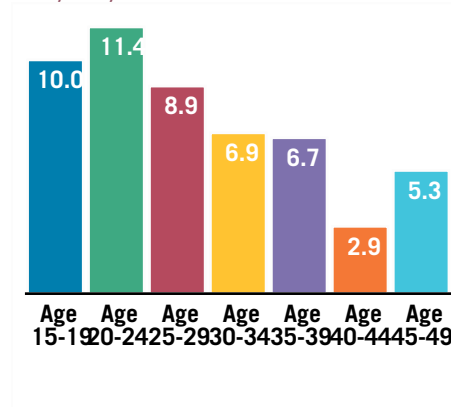
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]²⁵⁷
 - Allow minors to petition for protection orders [2009]³⁰⁷
 - Allow victims to petition for restraining order against a minor [2009]¹⁰²

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]³⁰⁸

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

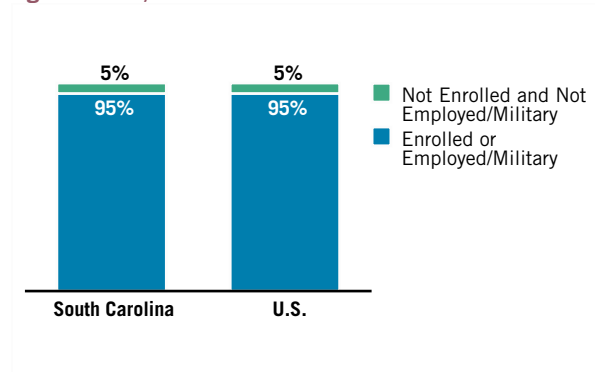
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



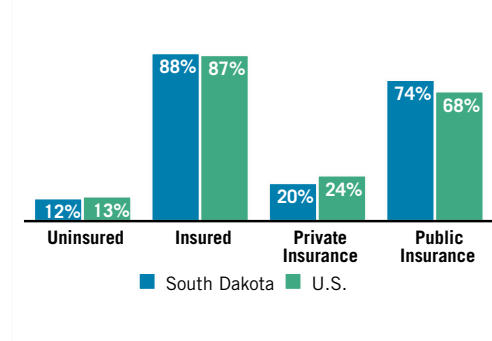


National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



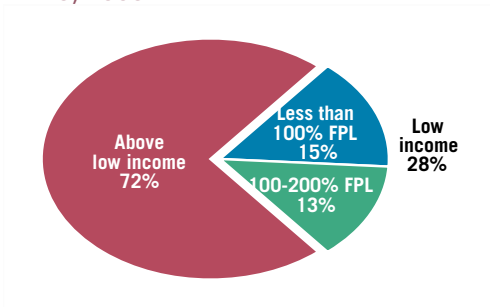
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on South Dakota's 71,289 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹

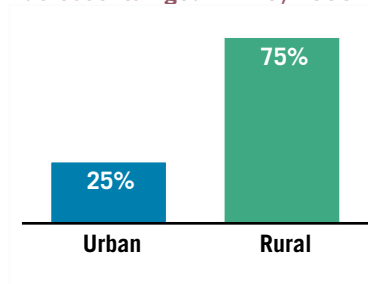


Updated: June 1, 2011

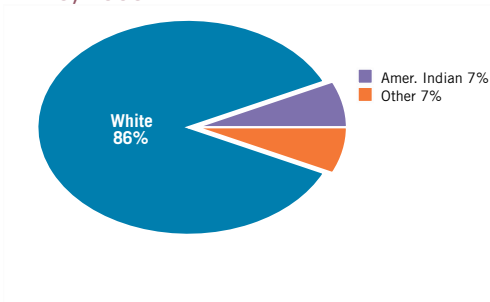
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

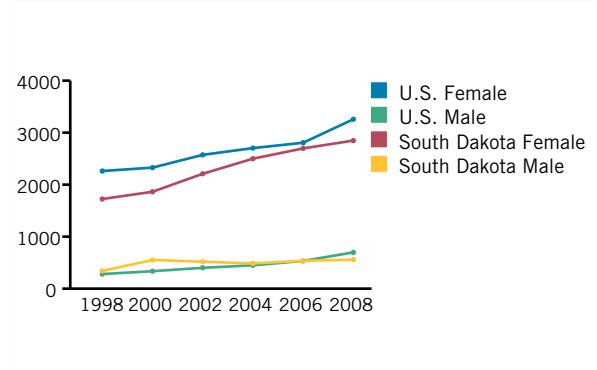
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]³⁰⁹
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

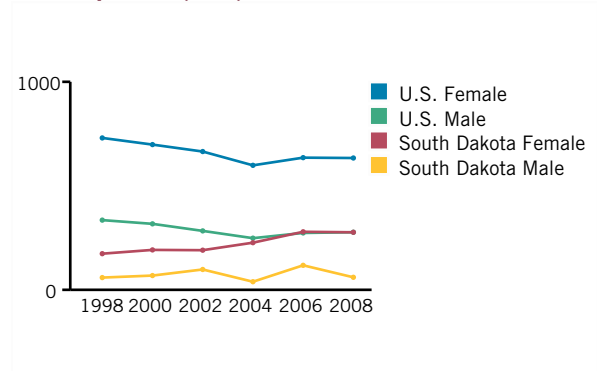
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

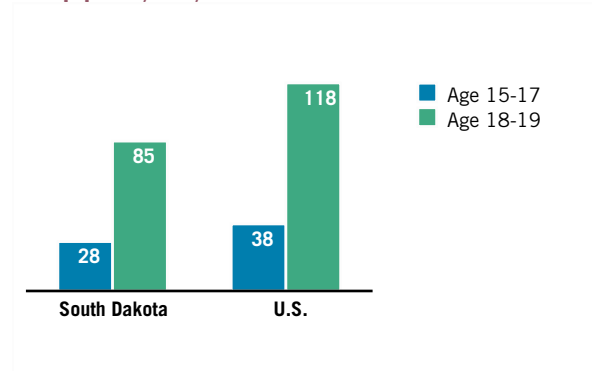
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

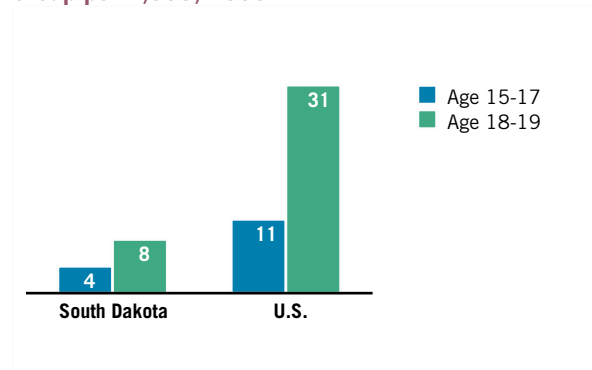
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

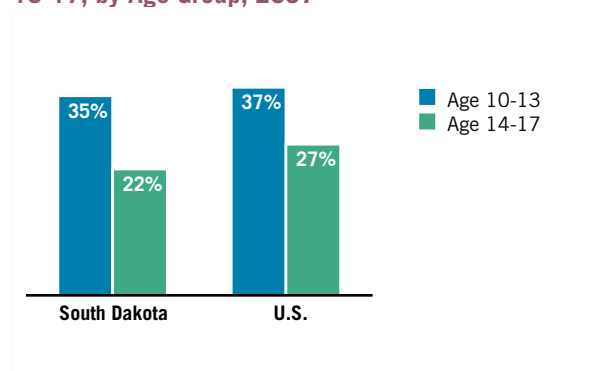
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

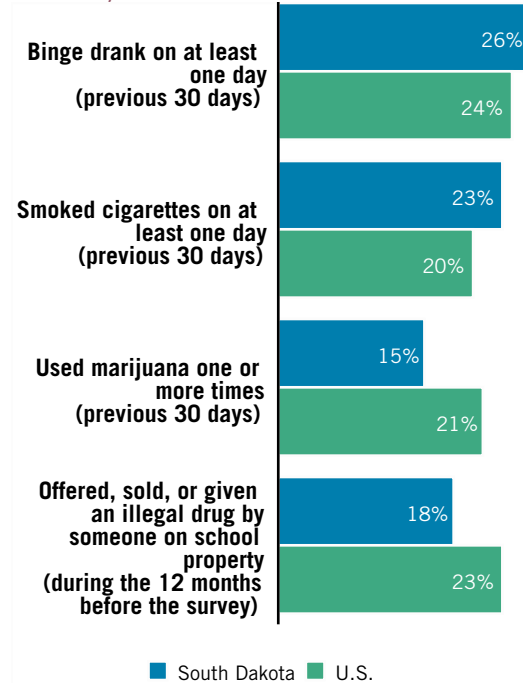
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]³¹⁰

State Choices to Promote Quality

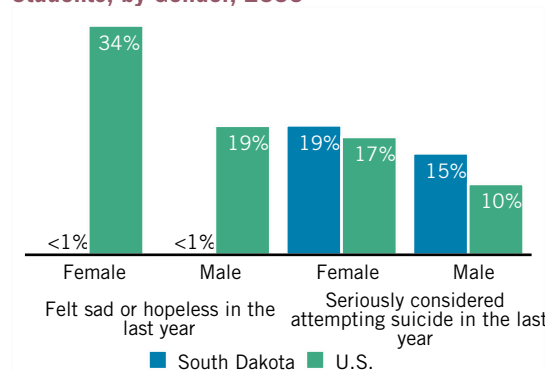
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

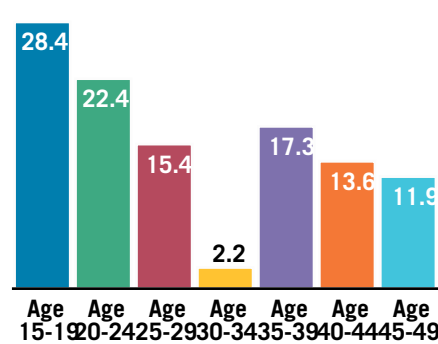
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³¹¹
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

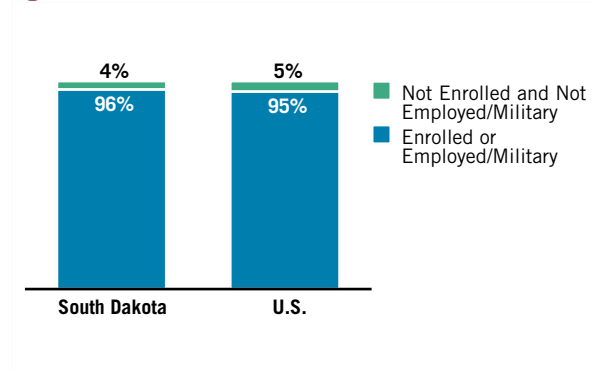
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





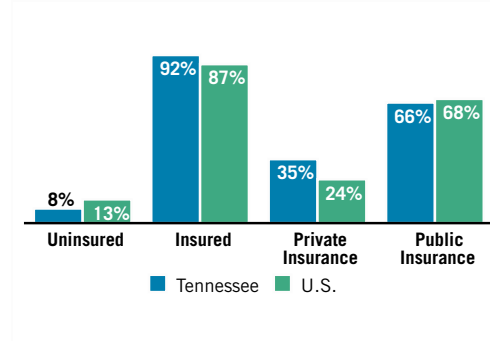
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



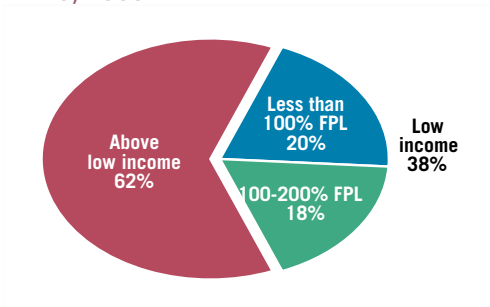
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Tennessee's 564,806 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

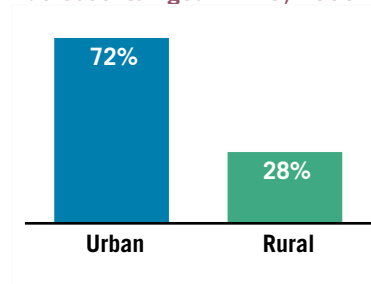
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



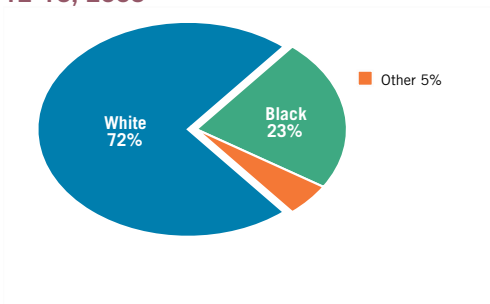
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

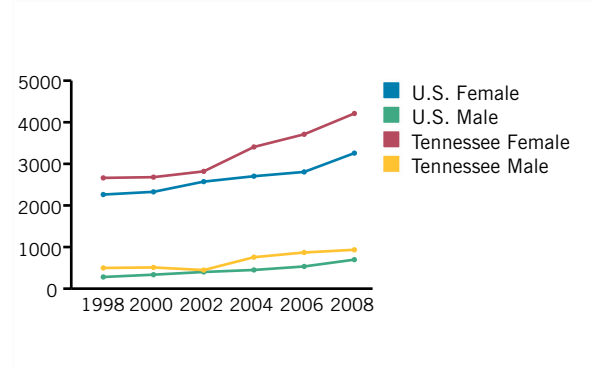
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]³¹²
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

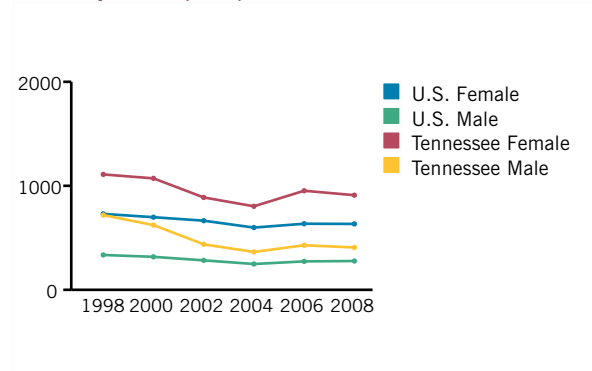
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]³¹³

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

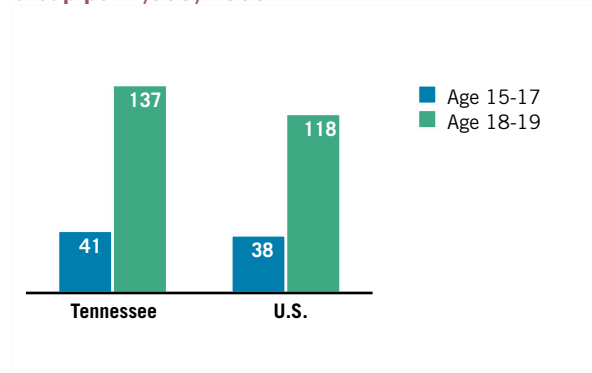
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

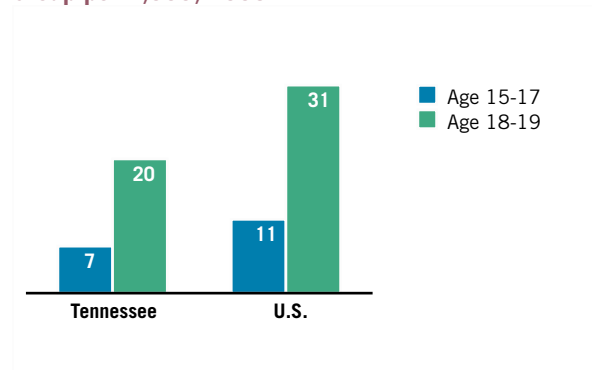
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

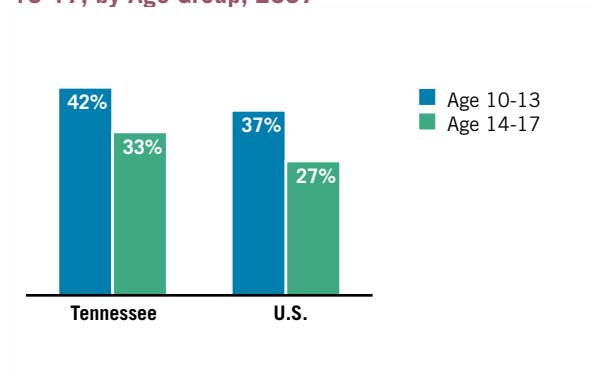
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

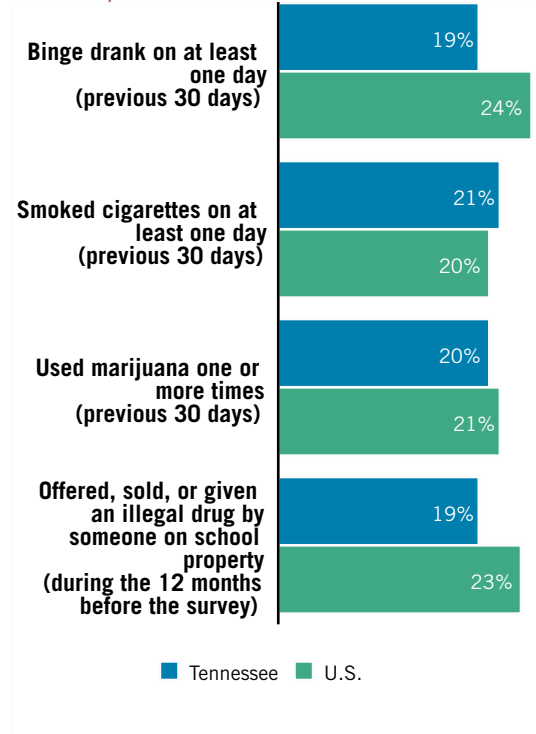
- Allow minors to consent to outpatient mental health care [2010]³¹⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

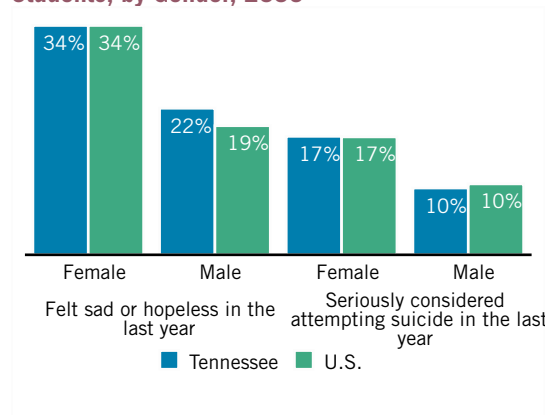
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

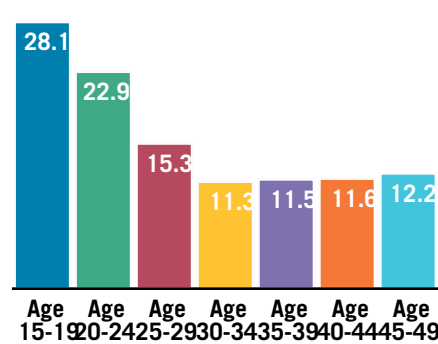
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]³¹⁵
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]³¹⁶

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]³¹⁶

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

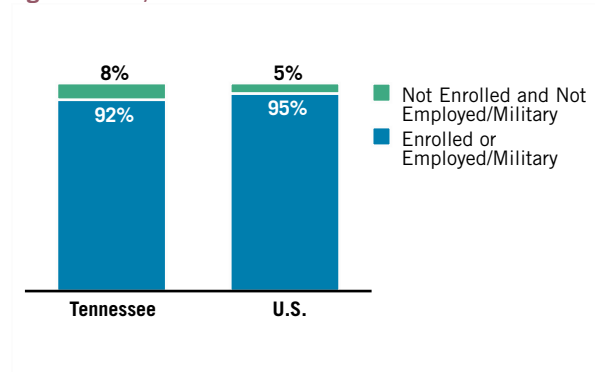
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

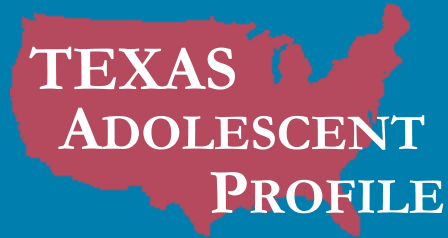
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





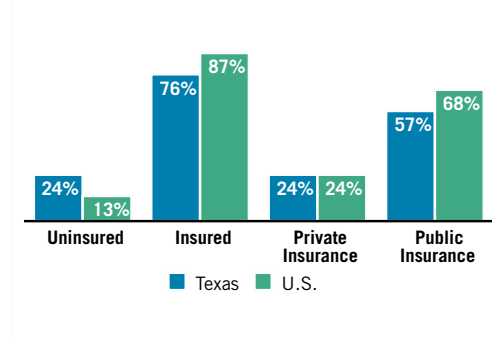
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



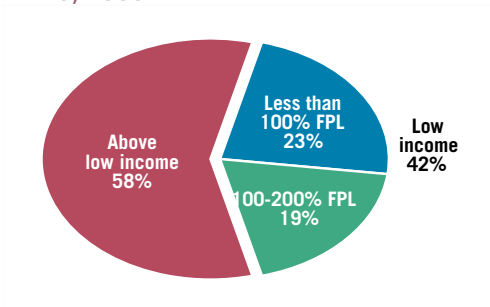
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Texas's 2,416,156 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

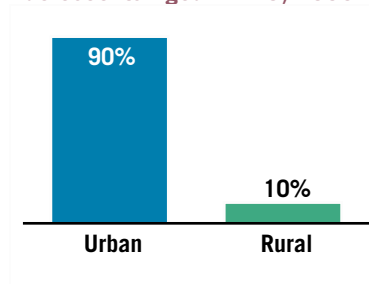
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



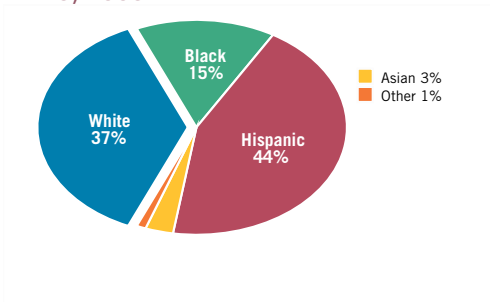
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

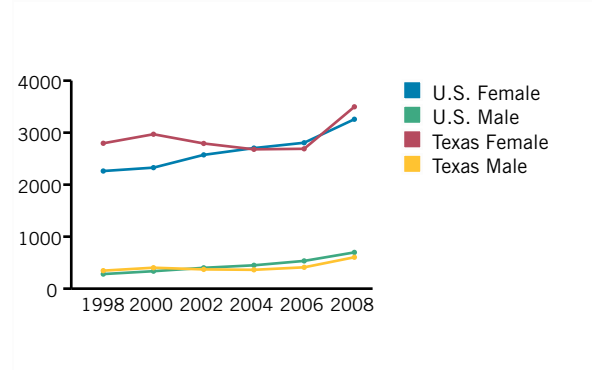
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]³¹⁷
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]³¹⁸
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
- HIV prevention education [2006]⁵¹
- STI prevention education [2006]⁵¹
- Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

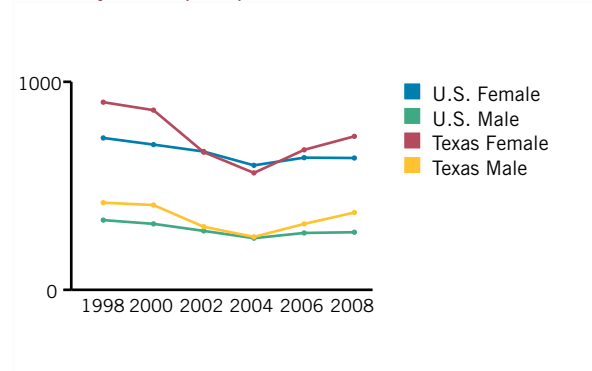
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]²⁰³
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁷⁶
- Medical care for their own children [2010]³¹⁹
- Abortion without parental notification or permission [2010]¹³⁰

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]¹⁵⁹
- Specify time requirements for physical education [2006]¹⁸²

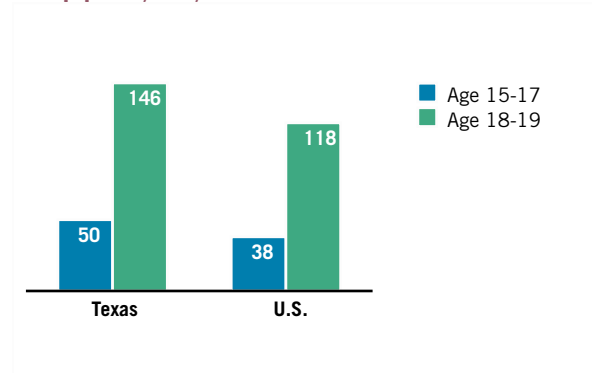
Services in Schools

- Have a program office dedicated to SBHCs [2008]³²⁰

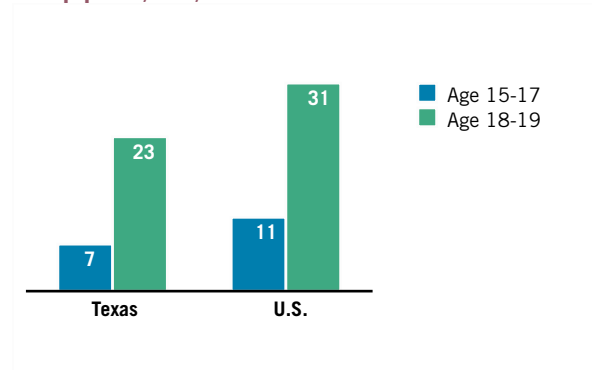
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

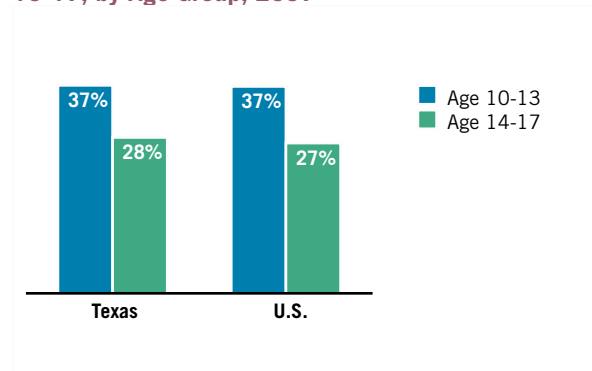
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

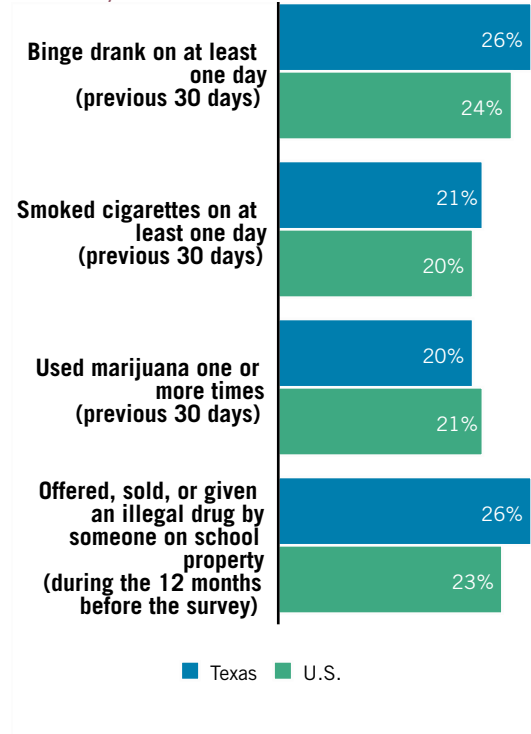
- Allow minors to consent to outpatient mental health care [2010]³²¹
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

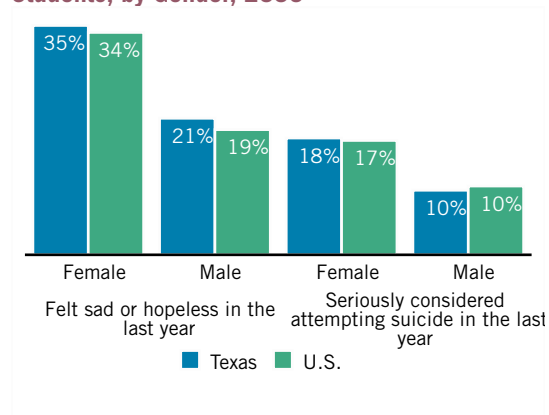
Workforce Development

- School counselors [2006]³²²
- School psychologists [2006]³²²
- School social workers [2006]³²²
- Provide funding or staff development on emotional and mental health to health education teachers [2006]³²³

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

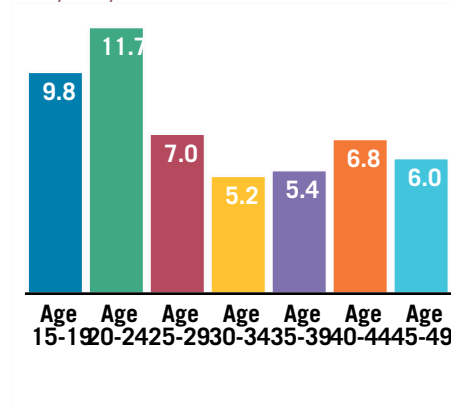
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]³²⁴
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]³²⁵
- Ban texting while driving for adolescent novice drivers [2010]³²⁶
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]³²⁷

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]³²⁷

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

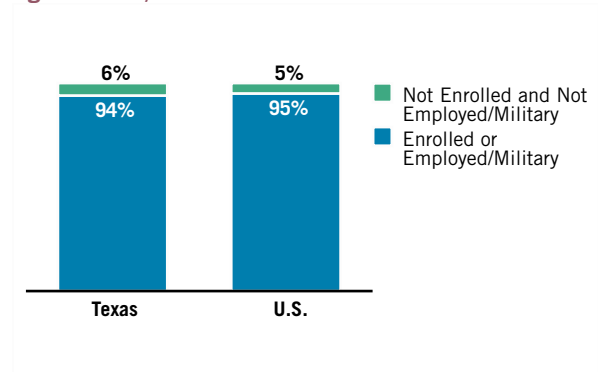
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

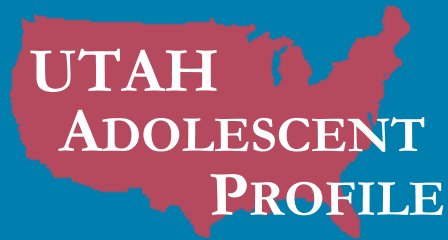
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





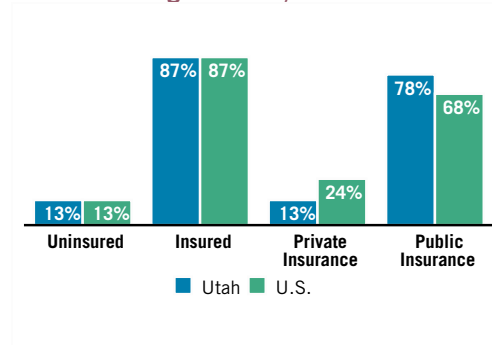
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



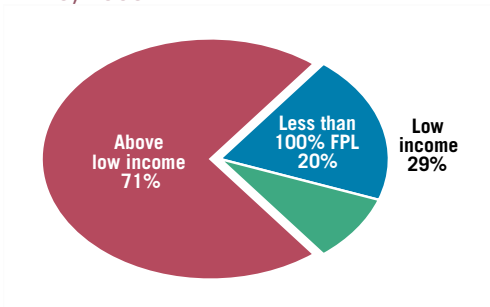
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Utah's 295,156 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

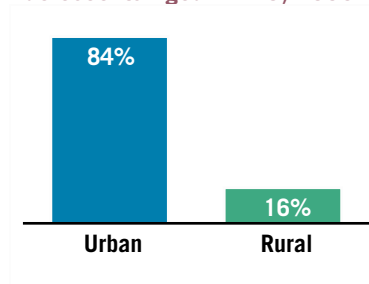
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



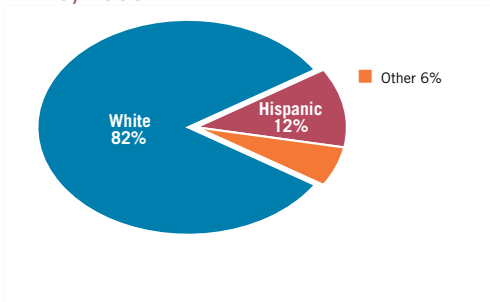
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

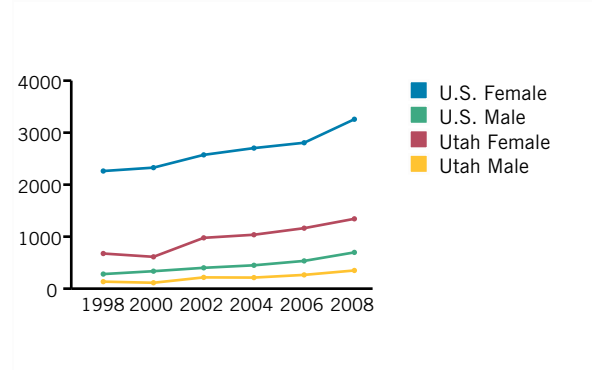
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

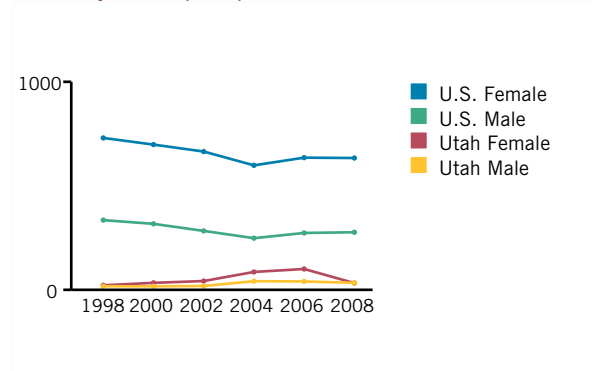
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁵⁷
- HIV and STI prevention and treatment services [2010]¹⁴⁰
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]³²⁸

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

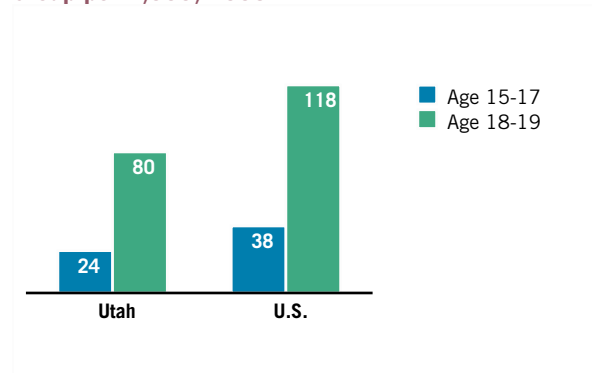
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

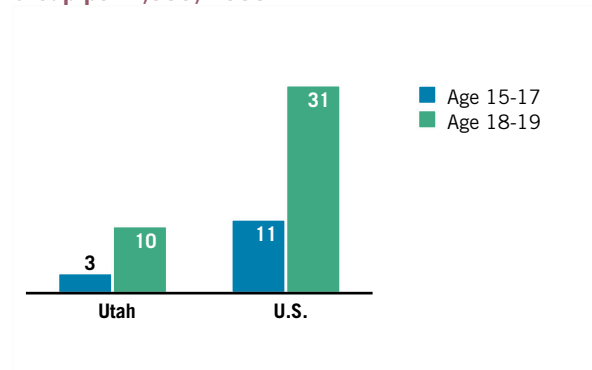
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

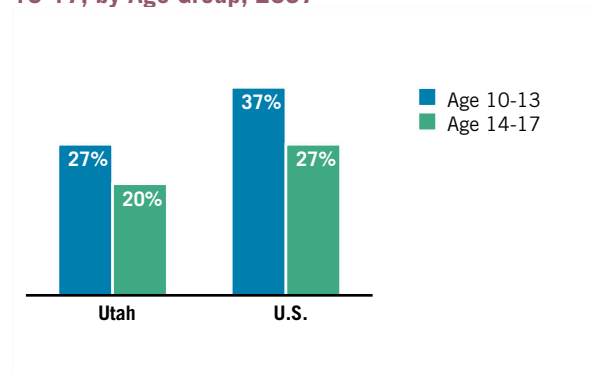
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

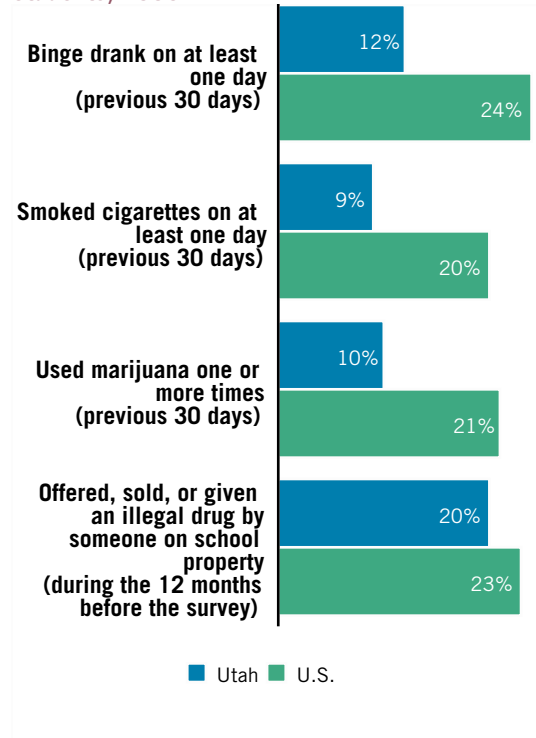
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]³²⁹

State Choices to Promote Quality

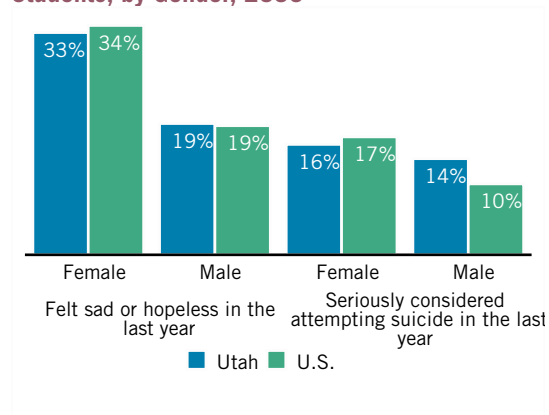
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

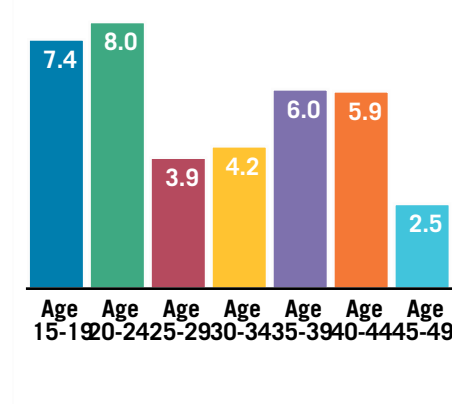
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³³⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]³⁶

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]¹⁰⁴

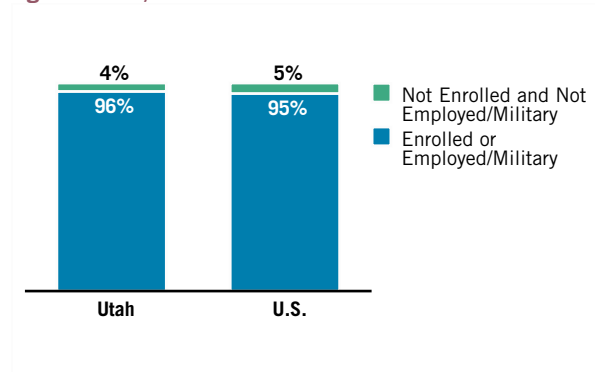
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

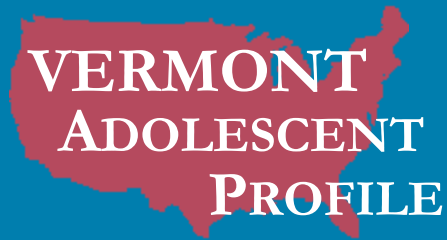
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





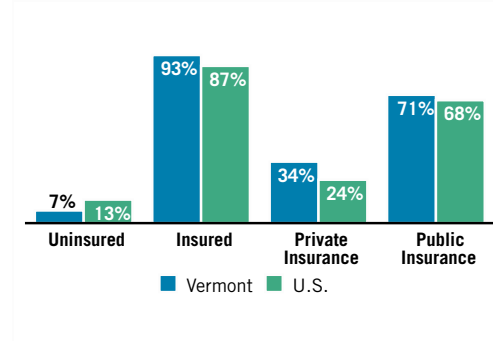
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



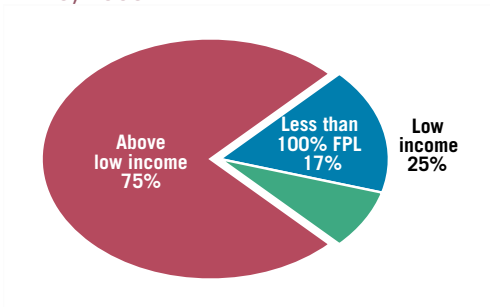
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Vermont's 53,022 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

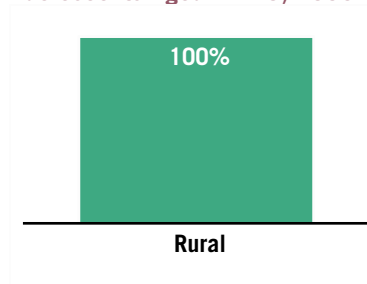
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



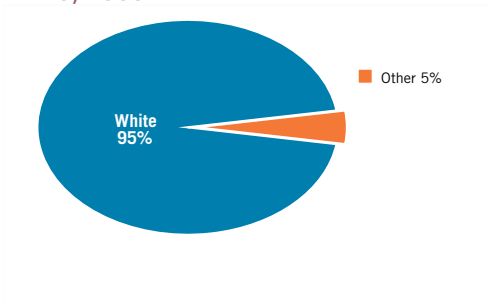
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

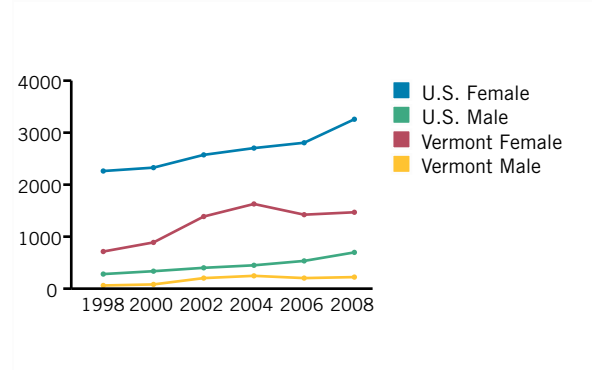
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
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- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

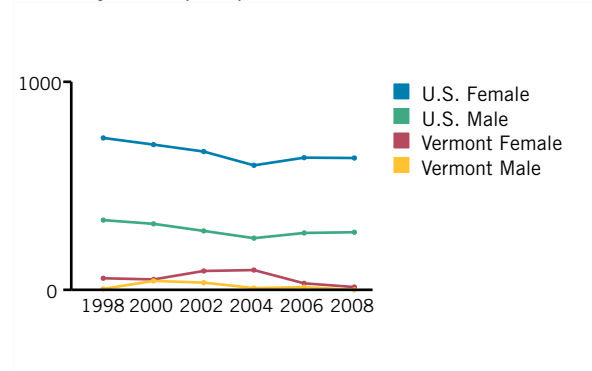
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]³³¹
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
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- Specify time requirements for physical education [2006]²¹

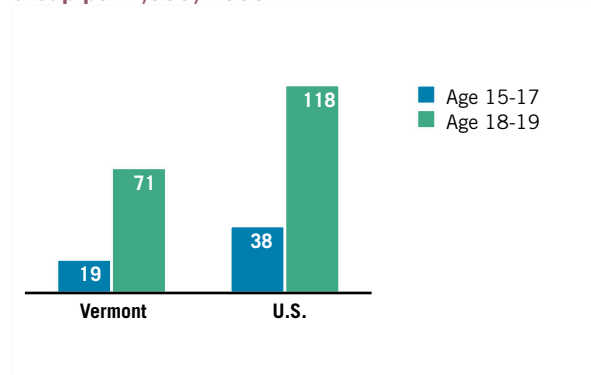
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

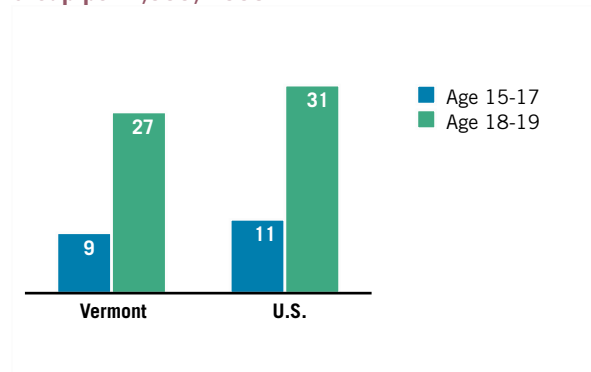
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

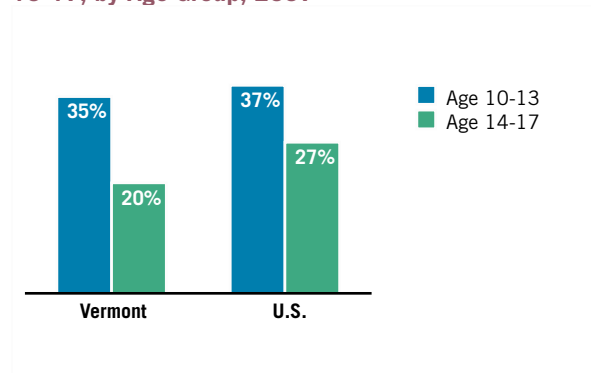
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

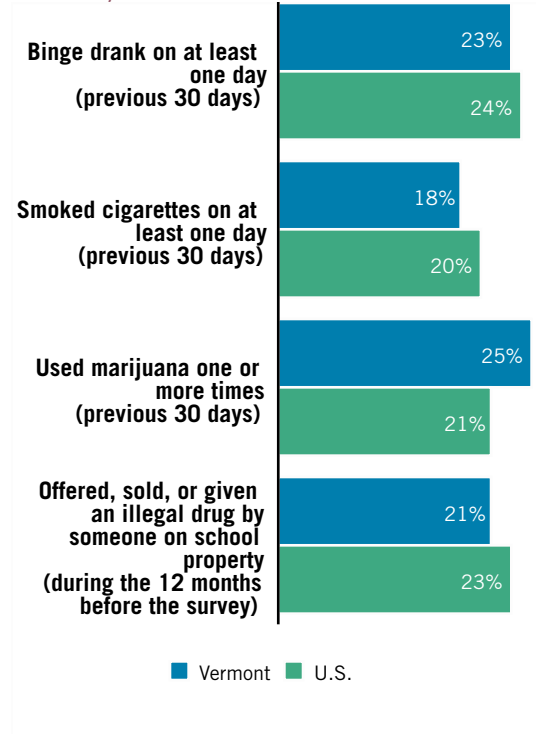
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]³³²

State Choices to Promote Quality

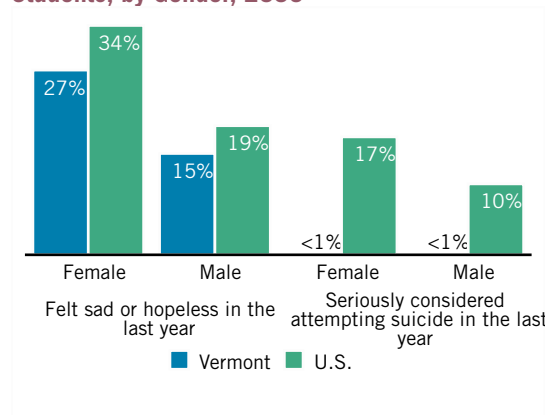
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

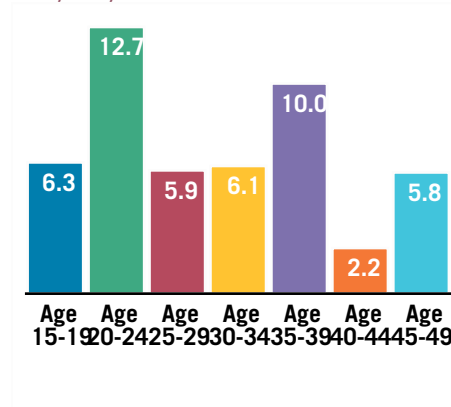
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

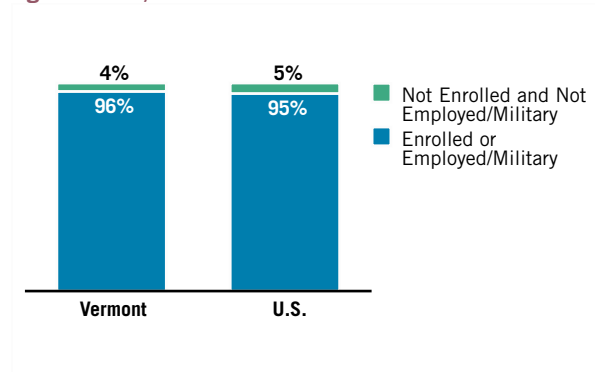
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

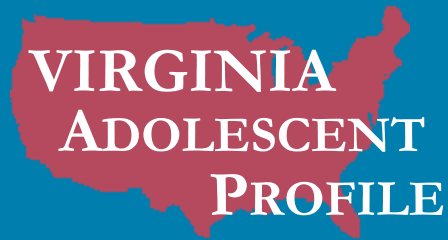
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





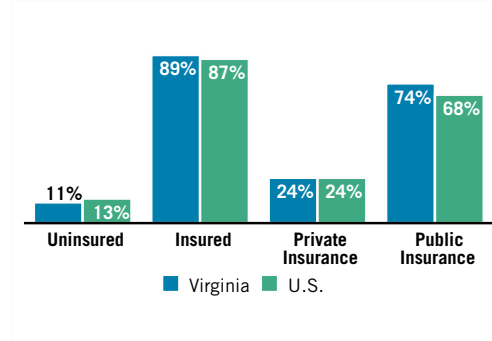
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



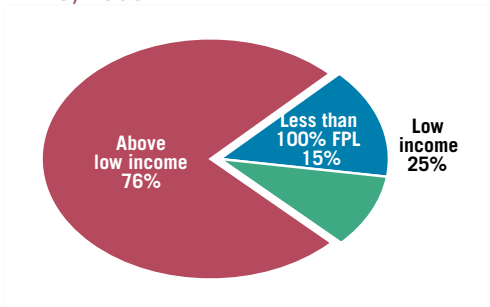
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Virginia's 685,613 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

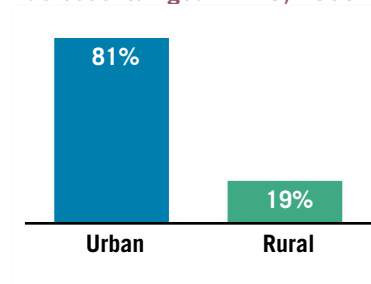
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



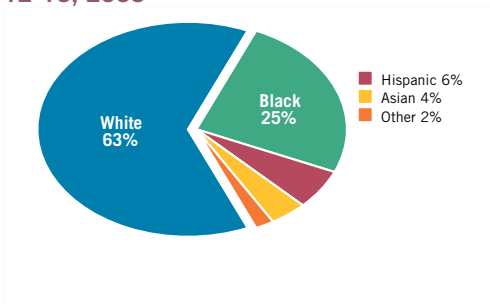
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

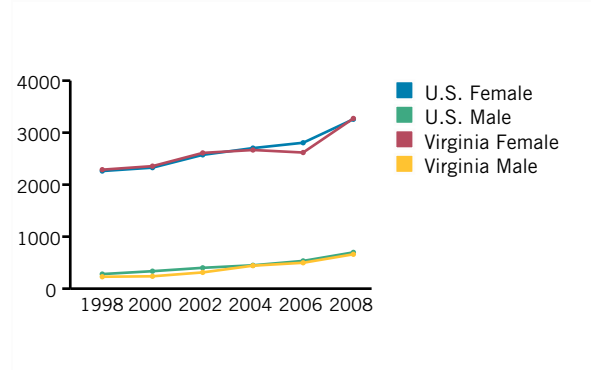
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

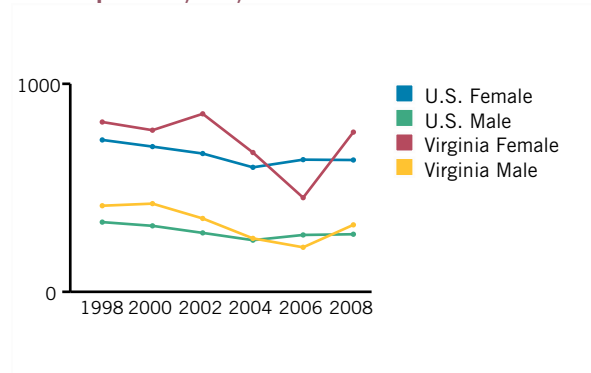
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]¹⁴
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]¹⁴
- Abortion without parental notification or permission [2010]³³³

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]⁹⁷
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]¹⁵⁹
- Specify time requirements for physical education [2006]¹⁸²

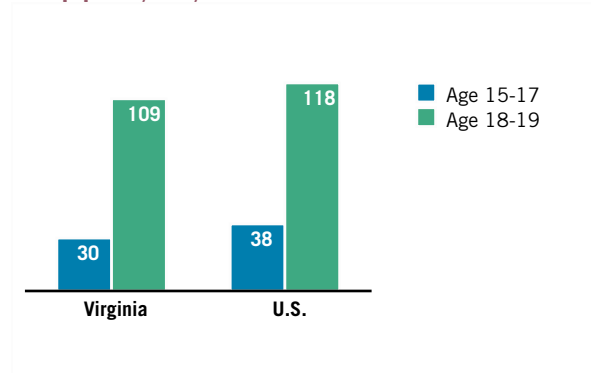
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

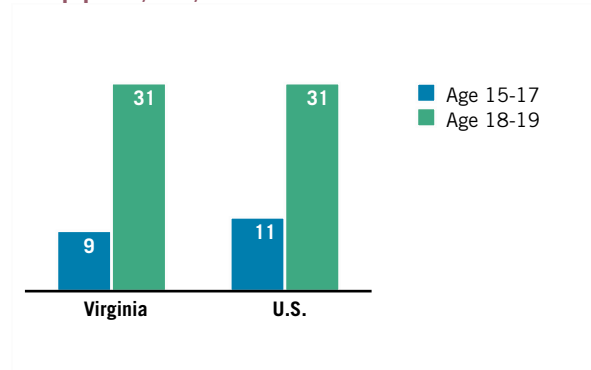
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

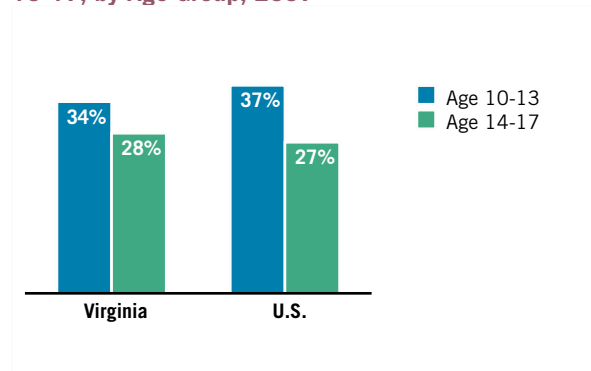
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁹⁸

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
Personal communication from the state indicates that this policy is in place, as of October 2010.
- Crisis intervention for personal problems [2006]²⁹⁶
- Suicide prevention services [2006]²⁹⁷

Law and Legislation

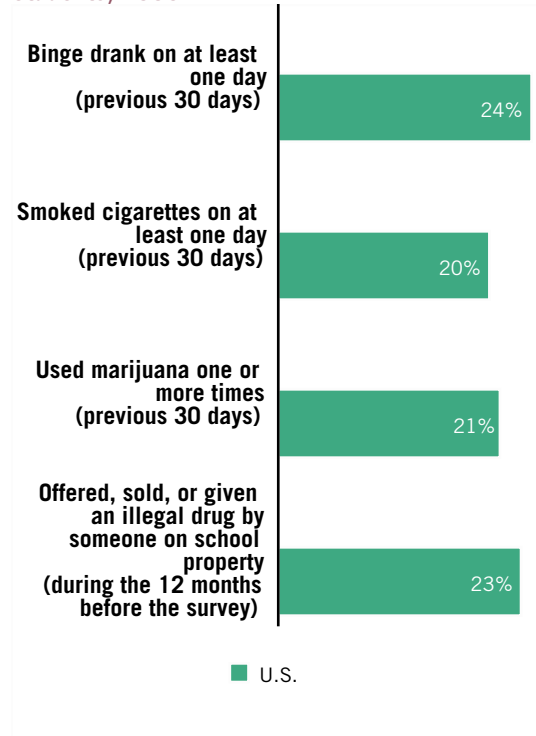
- Allow minors to consent to outpatient mental health care [2010]²⁴
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

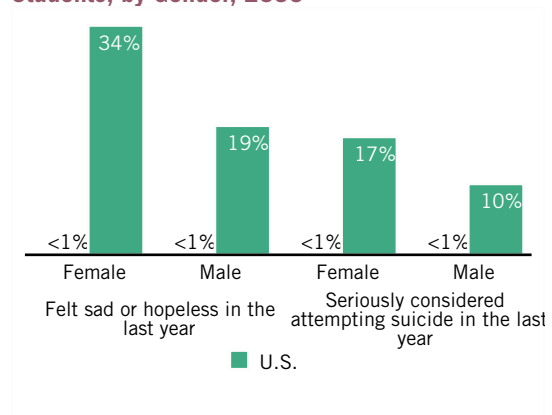
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]³³⁴
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]⁸³
- Ban texting while driving for adolescent novice drivers [2010]¹⁶⁹
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]³³⁵

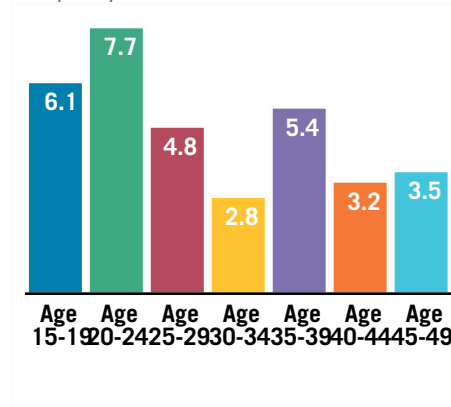
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]¹³²
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]³³⁵

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]¹⁰³

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁴⁴

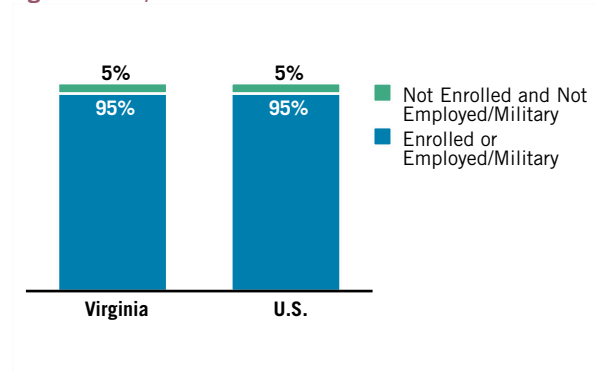
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





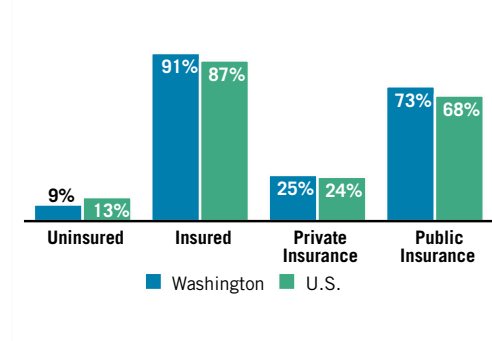
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



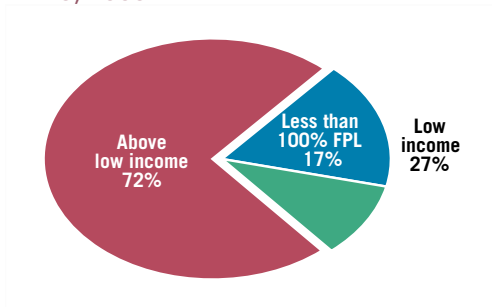
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Updated: June 1, 2011

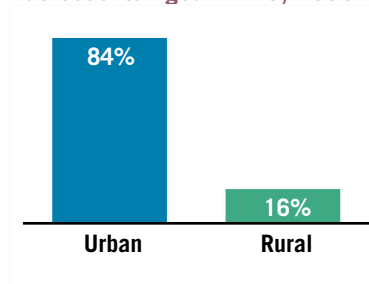
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



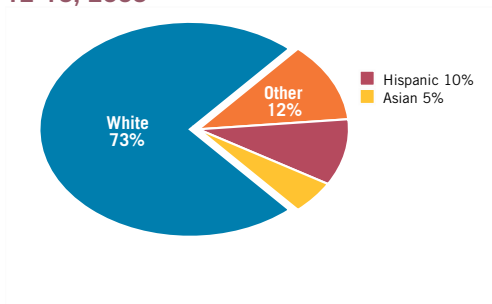
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

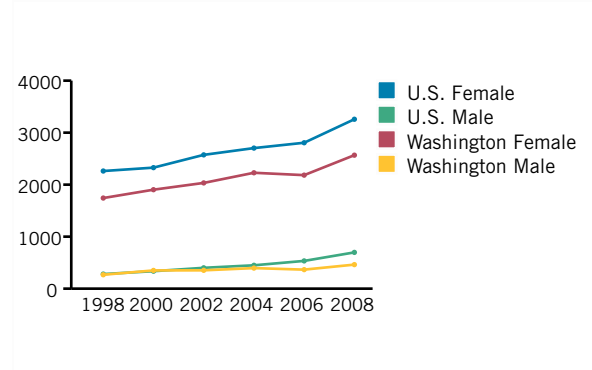
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]³³⁶
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]³³⁷
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- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

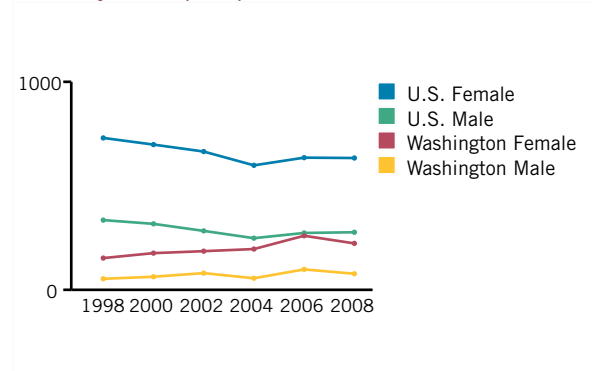
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]³³⁸
- Contraceptive and family planning services [2010]³³⁹
- HIV and STI prevention and treatment services [2010]¹⁴⁰
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]¹⁴

State Choices to Promote Quality

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- 5 Screenings for children 10-14 years [2009]¹⁵
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- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

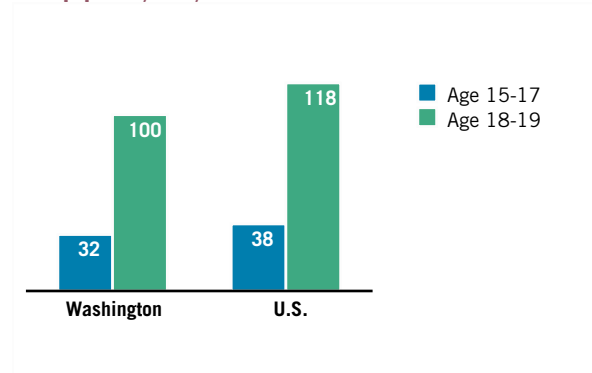
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

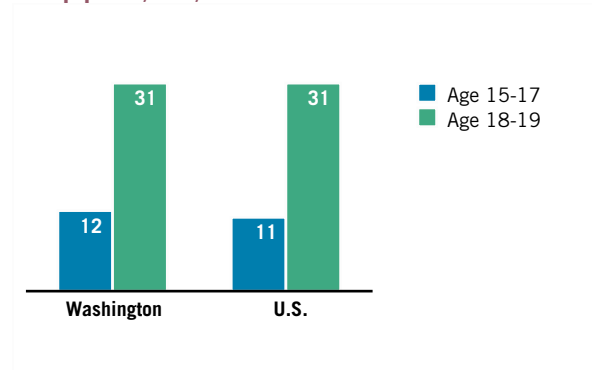
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

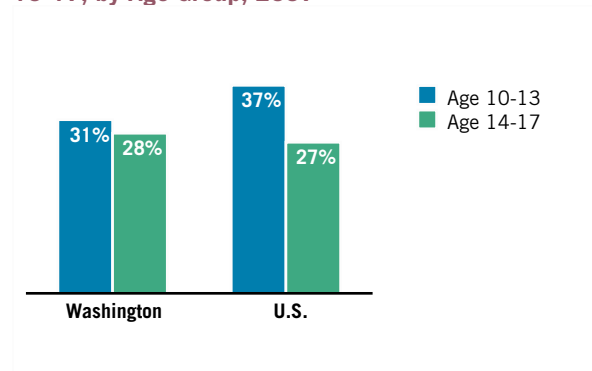
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

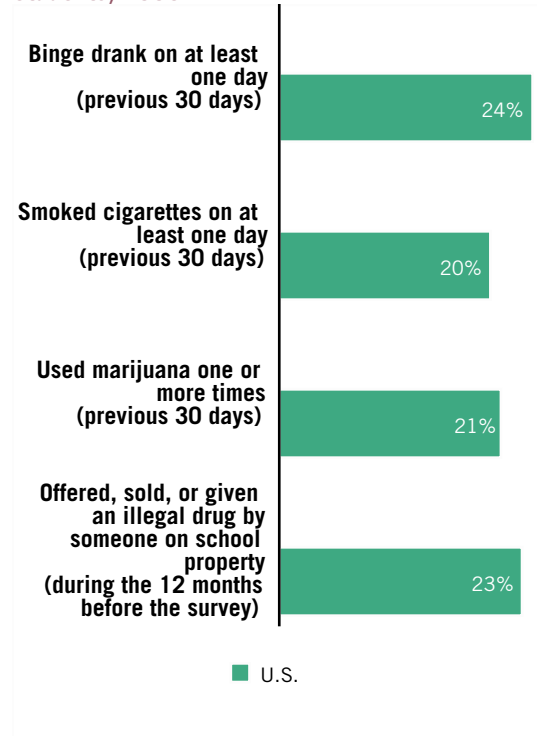
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State Choices to Promote Quality

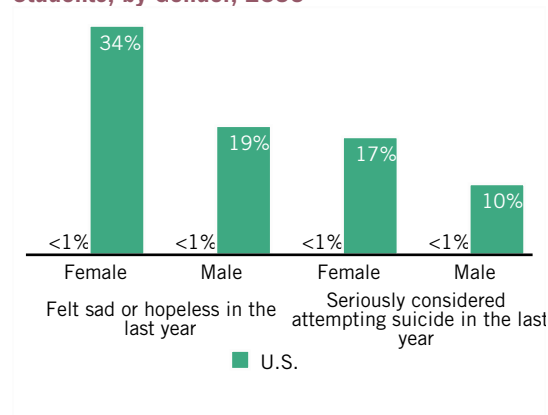
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
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- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
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- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]²⁹
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]³⁴¹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]³⁴²

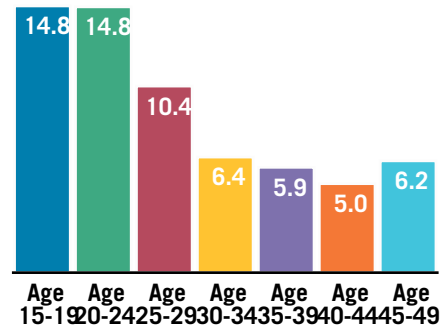
Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
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 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]⁶⁹
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]²¹²
 - Allow victims to petition for restraining order against a minor [2009]³⁶

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



- Require school curricula to address dating violence [2010]³⁴²

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

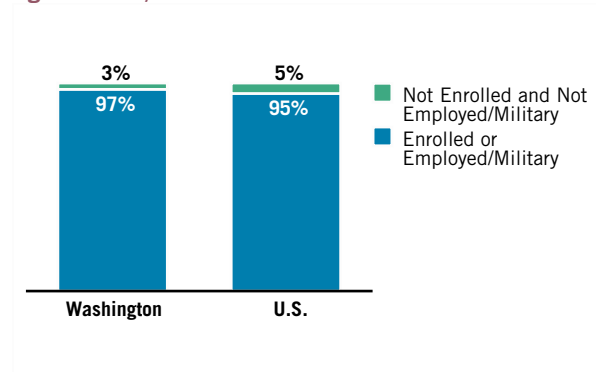
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁴²
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



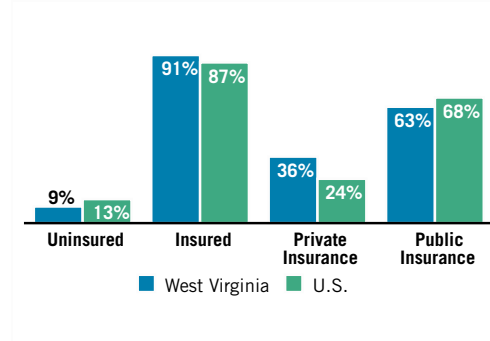


National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



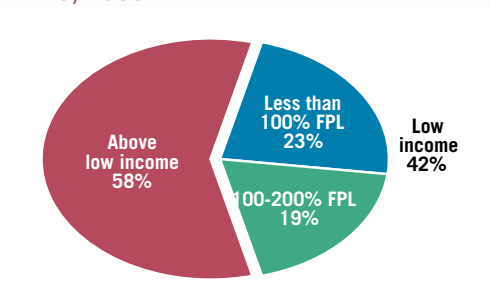
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on West Virginia's 147,074 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹

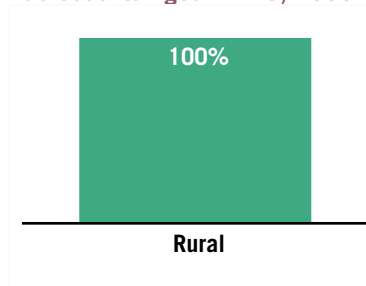


Updated: June 1, 2011

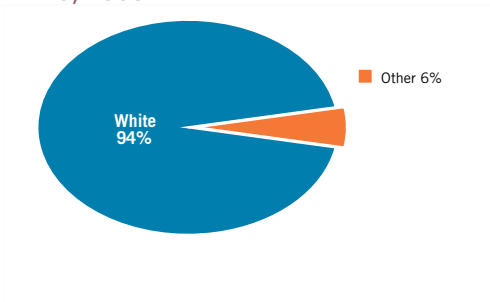
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

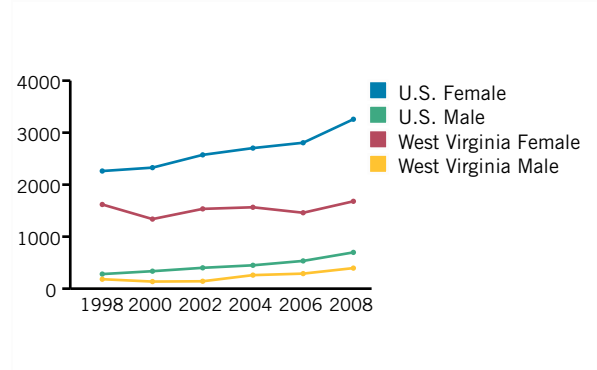
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

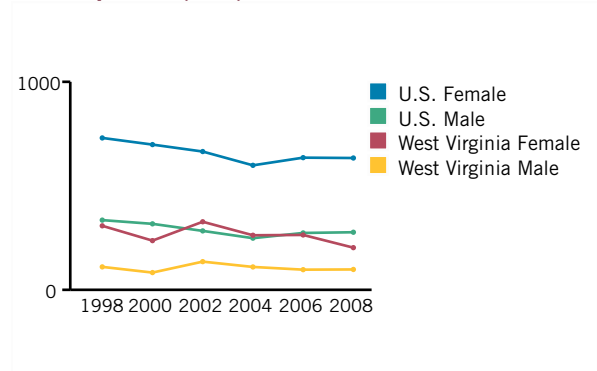
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]³⁴³

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

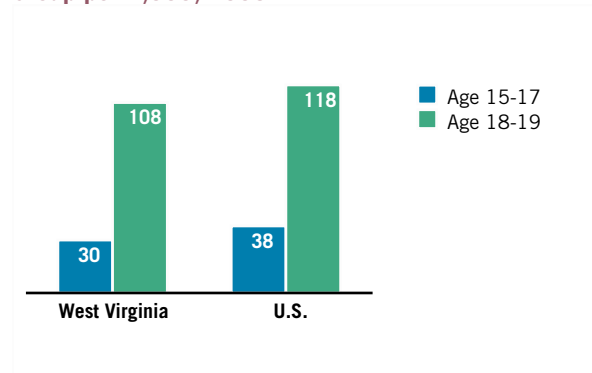
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

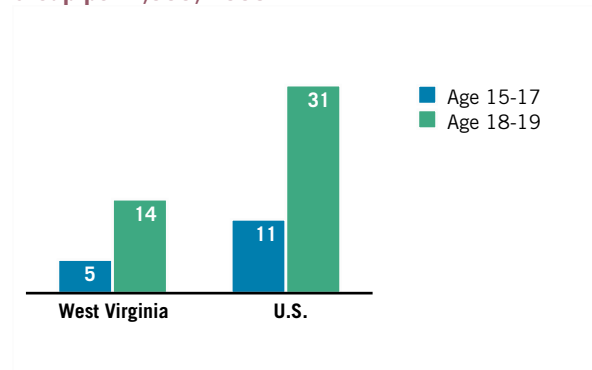
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

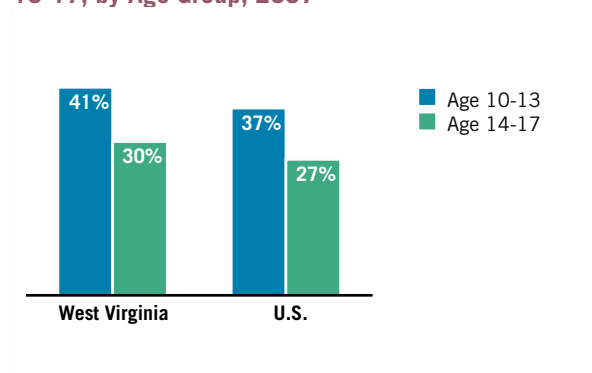
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

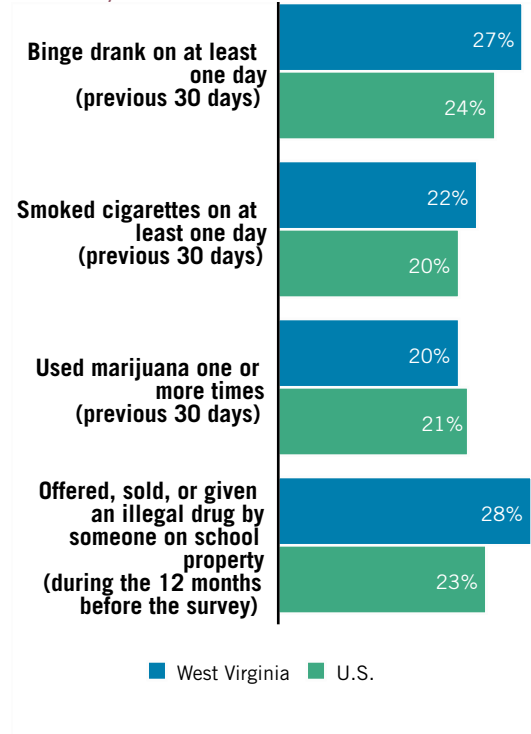
- Allow minors to consent to outpatient mental health care [2010]³²⁹
- Allow minors to consent to care for drug or alcohol abuse [2010]²⁴

State Choices to Promote Quality

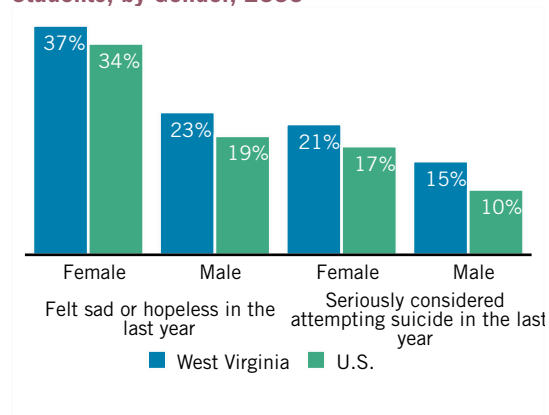
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

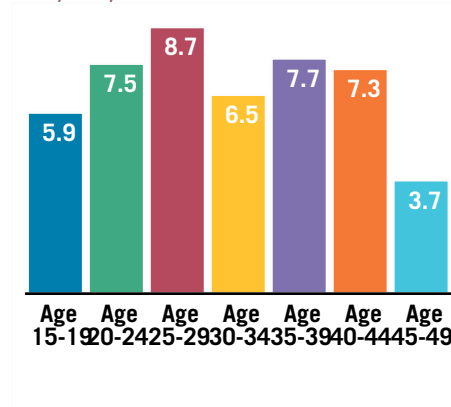
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]³⁴¹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

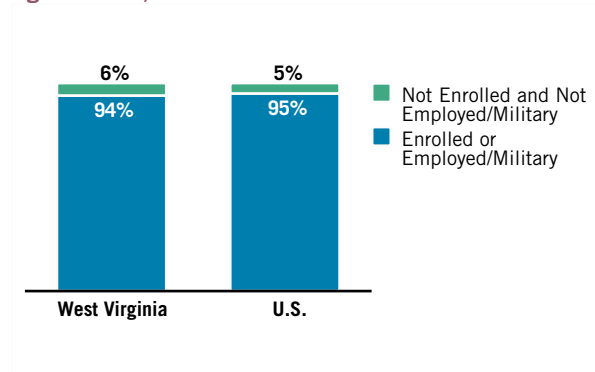
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





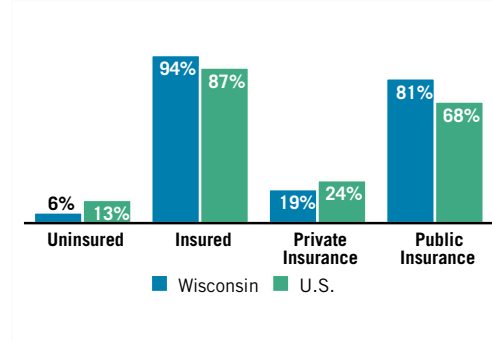
National Center for Children in Poverty
Mailman School of Public Health
Columbia University



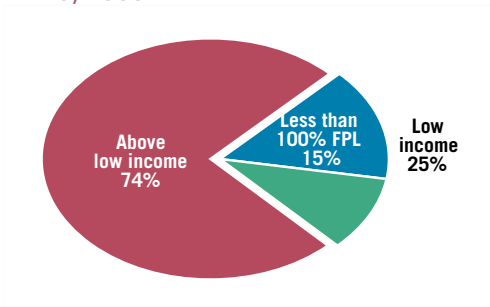
Although adolescence is generally perceived as a period of good health, many in this age group face poor health outcomes and establish unhealthy behaviors that follow them into adulthood. An adolescent's ability to successfully navigate the transition to adulthood is influenced not only by behaviors and exposure to risk but also by demographic characteristics such as race/ethnicity, geography, family income, and health insurance status, among others. State policies that promote access to high quality services for all adolescents can mitigate the effects of some of these factors and help ensure that adolescents enter adulthood healthy, independent, and ready to thrive. This state profile provides data on Wisconsin's 489,609 adolescents age 12 to 18 and highlights state policy choices in health, mental health, violence and injury prevention, and youth development that improve access to and quality of services and promote the health and well-being of this age group.

Updated: June 1, 2011

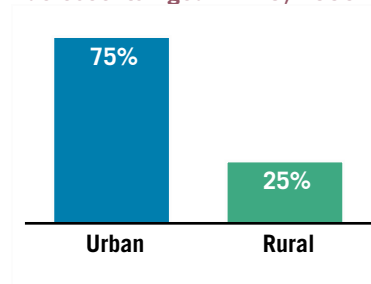
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



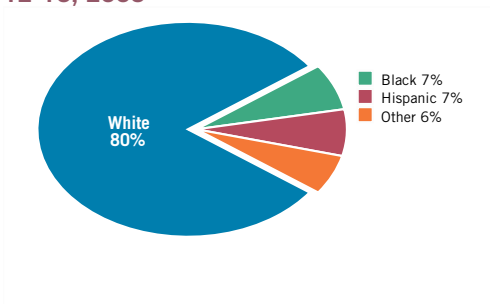
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

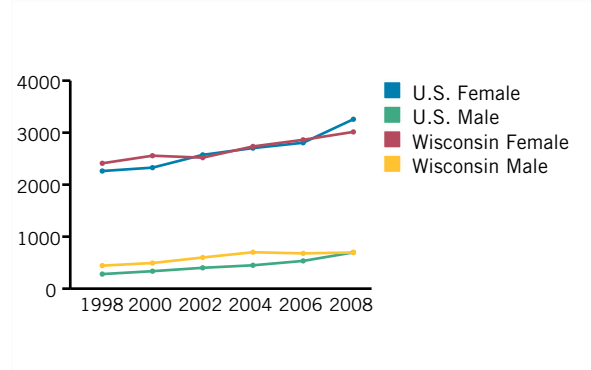
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]¹¹³
- Use Chafee funds to provide Medicaid eligibility to foster care youth aging out of the system [2009]⁷
- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

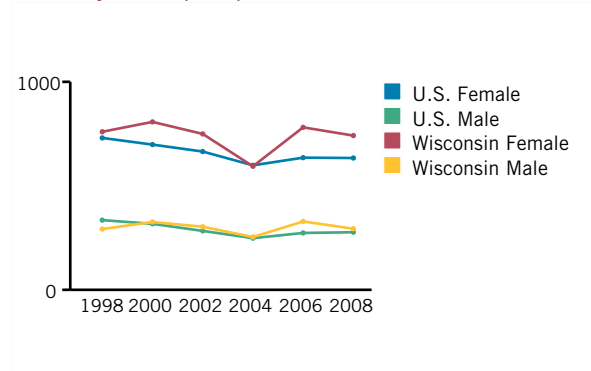
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]⁵²
- HIV and STI prevention and treatment services [2010]⁶⁶
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]³⁴⁴

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

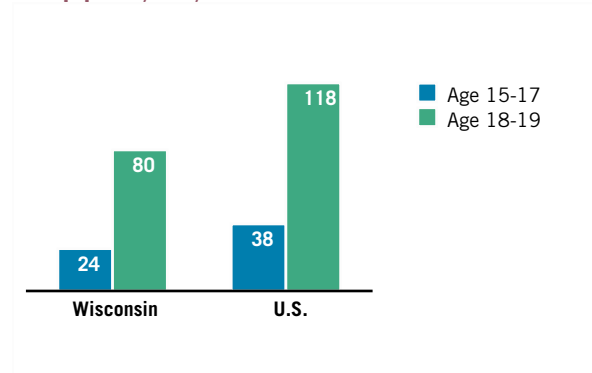
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

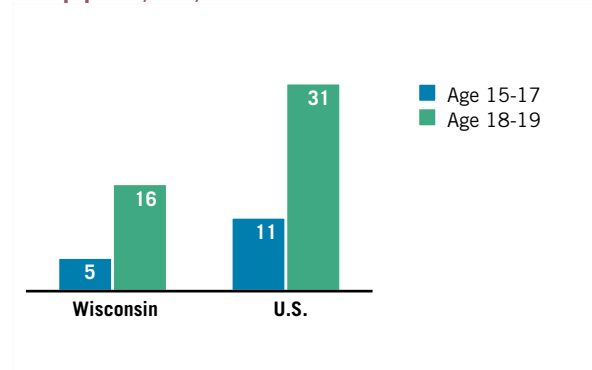
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

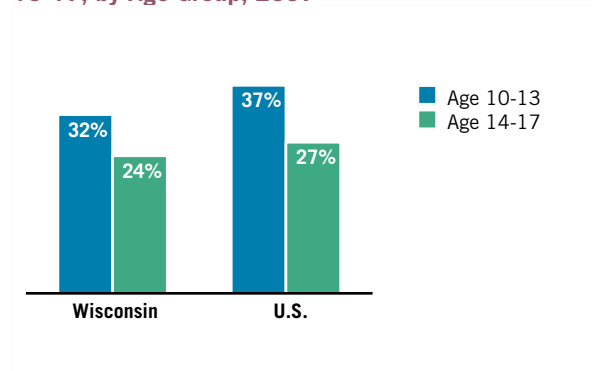
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]³⁴⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

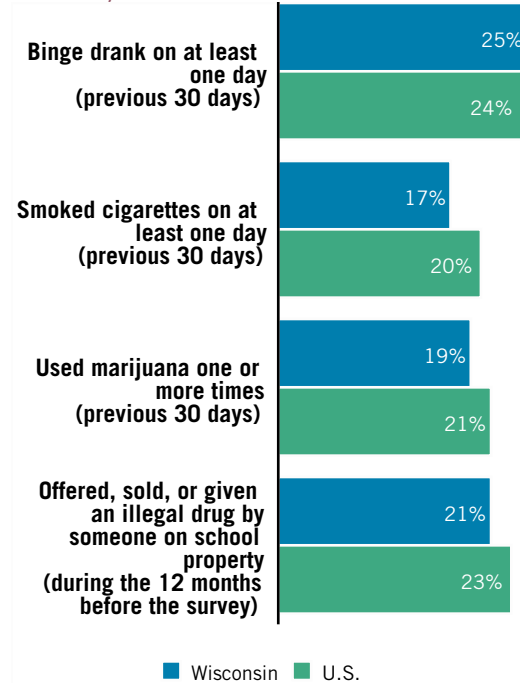
- Allow minors to consent to outpatient mental health care [2010]²⁴
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State Choices to Promote Quality

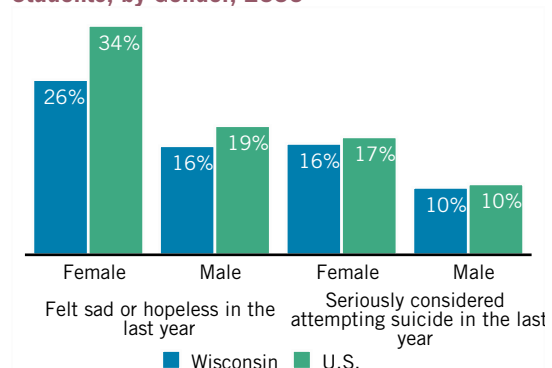
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

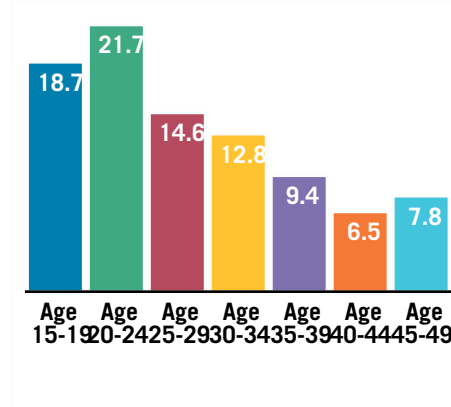
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]³⁴⁶
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³¹

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]³⁶
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

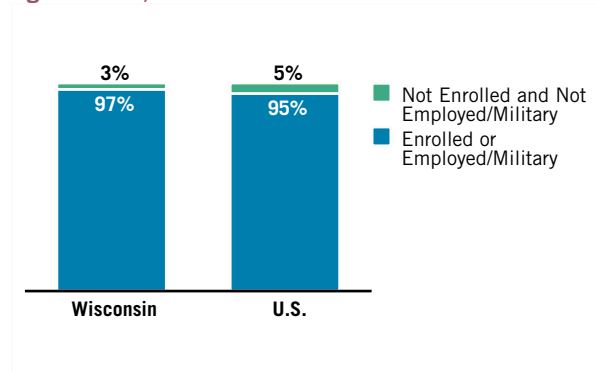
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

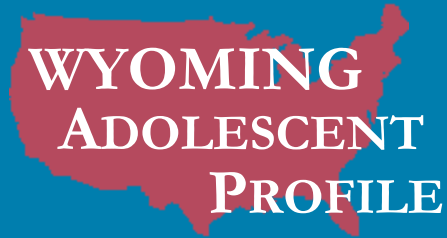
- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹





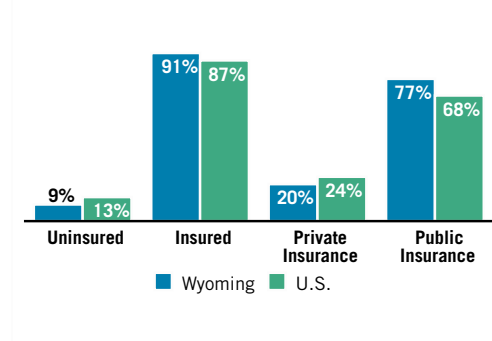
National Center for Children in Poverty
 Mailman School of Public Health
 Columbia University



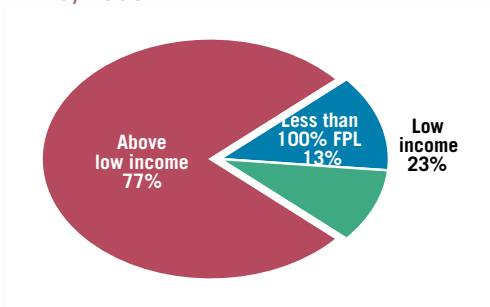
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Updated: June 1, 2011

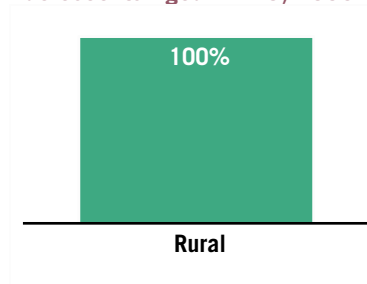
Health Insurance Coverage Among Adolescents Aged 12-18, 2008¹



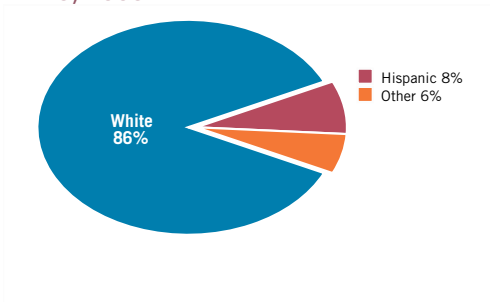
Family Income Among Adolescents Aged 12-18, 2008¹



Type of Area of Residence Among Adolescents Aged 12-18, 2009³



Race/Ethnicity Among Adolescents Aged 12-18, 2008²



HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

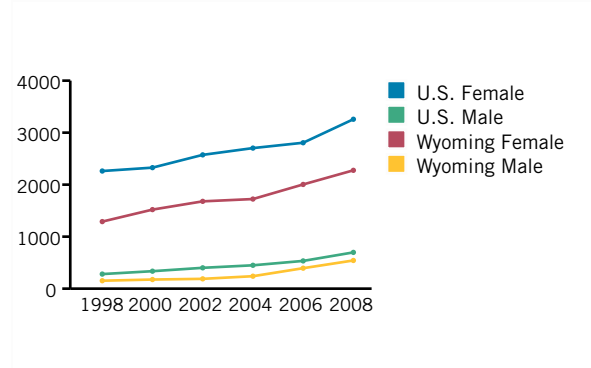
- Medicaid [2009]⁴
- CHIP [2009]⁴
- Extend CHIP to cover legal immigrant children [2010]⁴⁸
- Maintain or suspend but do not terminate Medicaid enrollment for youth committed to a juvenile facility [2009]⁶⁵
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- Require CHIP coverage for contraceptives [2006]⁵⁰
 - HIV prevention education [2006]⁵¹
 - STI prevention education [2006]⁵¹
 - Pregnancy prevention education [2006]⁵¹

- Require physical activity and fitness taught in schools [2006]⁵¹

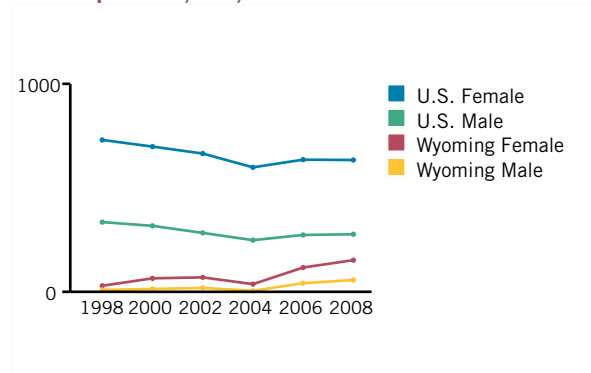
Services in Schools

- Provide funding for School-based Health Centers (SBHCs) [2008]¹¹
 - Medicaid [2008]¹¹
 - CHIP [2008]¹¹
- Require districts or schools to provide services for HIV, STDs, and pregnancy prevention [2006]¹²

Chlamydia Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



Gonorrhea Rates Among Adolescents Aged 15-19, by Gender per 100,000, 1998-2008¹³



HEALTH

State Choices to Promote Access (continued)

Law and Legislation

- Prenatal care [2010]⁵²
- Contraceptive and family planning services [2010]¹⁴
- HIV and STI prevention and treatment services [2010]¹⁴
- Medical care for their own children [2010]⁷⁴
- Abortion without parental notification or permission [2010]²²¹

State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- 5 Screenings for children 10-14 years [2009]¹⁵
- 4 Screenings for children 15-18 years [2009]¹⁵
- Require or recommend that schools make fruits or vegetables available to students whenever other food is offered or sold [2006]¹⁹
- Require or recommend that schools make healthful beverages available to students whenever other beverages are offered or sold [2006]¹⁹
- Have statutory nutritional standards for school meal programs beyond federal regulations [2005]²⁰
- Specify time requirements for physical education [2006]²¹

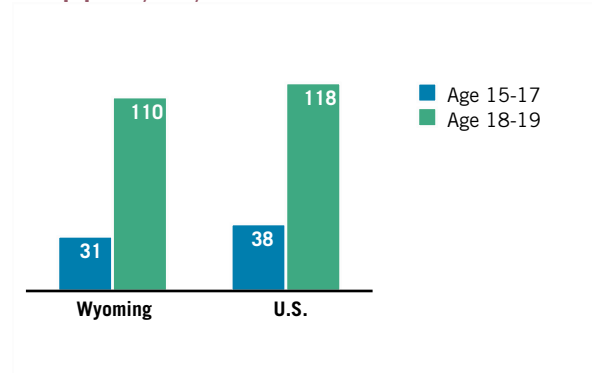
Services in Schools

- Have a program office dedicated to SBHCs [2008]¹¹

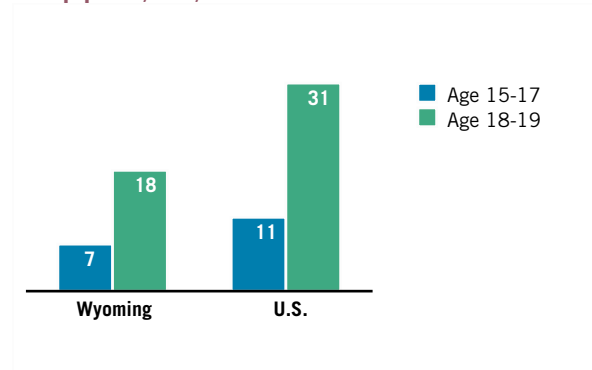
Workforce Development

- Require newly hired health education teachers to have undergraduate or graduate training in health education [2006]¹⁸

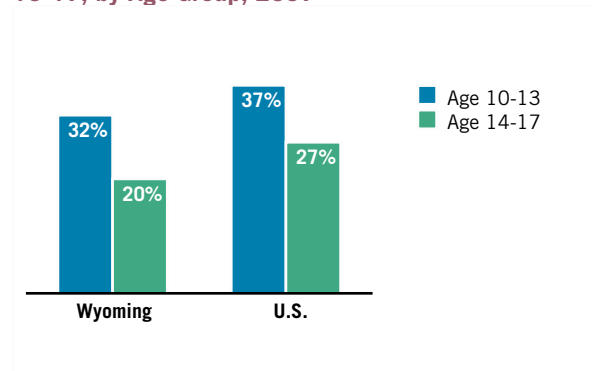
Pregnancy Rates Among Adolescents Aged 15-19, by Age Group per 1,000, 2005¹⁶



Abortion Rates Among Adolescents Aged 15-19 by Age Group per 1,000, 2005¹⁶



Obesity/Overweight Status Among Adolescents Aged 10-17, by Age Group, 2007¹⁷



MENTAL HEALTH

State Choices to Promote Access

Promotion, Prevention, and Early Intervention

- Have a public school health education curriculum that requires drug/alcohol prevention education [2006]⁵¹
- Have legislation or board of education policy that explicitly establishes and applies social and emotional learning standards [2010]⁵⁵

Services in Schools

- Counseling for emotional or behavioral disorders [2006]²³
- Crisis intervention for personal problems [2006]²³
- Suicide prevention services [2006]¹²

Law and Legislation

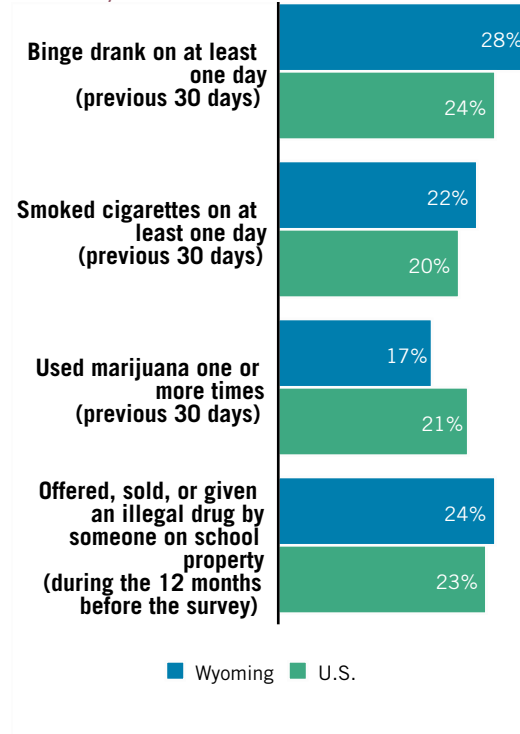
- Allow minors to consent to outpatient mental health care [2010]⁷⁶
- Allow minors to consent to care for drug or alcohol abuse [2010]³²⁹

State Choices to Promote Quality

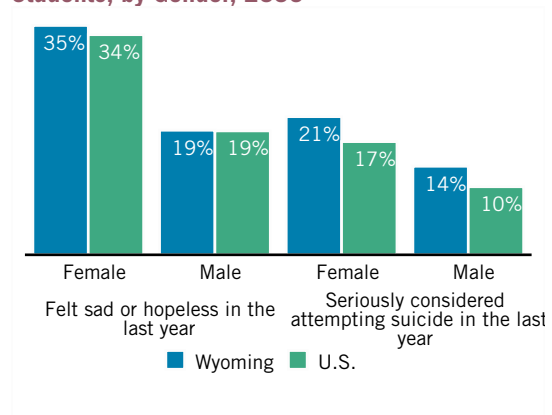
Workforce Development

- School counselors [2006]²⁵
- School psychologists [2006]²⁵
- School social workers [2006]²⁵
- Provide funding or staff development on emotional and mental health to health education teachers [2006]²⁶

Self-reported Substance Use Among High School Students, 2009²⁷



Serious Mental Health Disturbances Among High School Students, by Gender, 2009²⁷



Self-reported mental health needs of youth in juvenile justice residential placement (not state-specific)[2003]²⁸

- 68% Easily upset
- 61% Lost temper easily
- 61% Felt angry a lot
- 51% Had nervous or worried feelings keep you from doing things you want to do?
- 52% Felt lonely too much of the time
- 70% Had something very bad or terrifying happen to you
- 67% Seen someone severely injured or killed (in person)

VIOLENCE AND INJURY PREVENTION

State Choices to Promote Healthy Behaviors

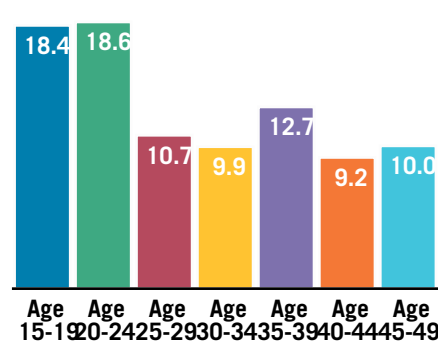
Promotion, Prevention, and Early Intervention

- Require injury and violence prevention and safety taught in schools [2006]⁵¹

Law and Legislation

- Require helmets for all motorcycle and low-power cycle (LPC) riders 17 and younger [2010]¹³⁷
- Require bicycle helmets on riders 17 and younger [2010]²⁹
- Ban all cell phone use for adolescent novice drivers [2010]²⁹
- Ban texting while driving for adolescent novice drivers [2010]³⁰
- Stalking statutes explicitly address cyberstalking, including third party harassment [2006]³⁴⁷

Rates of Motor Vehicle Traffic Occupant Deaths per 100,000, 2007³²



State Choices to Promote Quality

Promotion, Prevention, and Early Intervention

- Require school curricula to address dating violence [2010]⁵⁹

Workforce Development

- Provide funding for staff development or offered staff development on violence and injury prevention and safety to health education teachers [2006]²⁶

Law and Legislation

- Have laws that protect students from bullying and harassment on the basis of sexual orientation and gender identity or expression [2010]³⁴
- Have graduated driver licensing system [2010]³⁵
 - Require learner's entry age at 16 [2010]³⁵
 - Require learner's holding period at least 6 months [2010]³⁵
 - Require practice driving certification at least 30 hours [2010]³⁵
 - Require night driving restriction at 9 or 10pm [2010]³⁵
 - Restrict underage passengers to 1 or 2 [2010]³⁵
 - Require that restrictions last until age 18 [2010]³⁵
- Have domestic violence protection laws for adolescents that received a score of B or higher from Break the Cycle [2009]³³
 - Allow victims of domestic violence who are dating their abuser to apply for a civil domestic violence protection or restraining order [2009]³³
 - Have protection laws that do not exclude same-sex couples, explicitly or by stated intent [2009]³³
 - Allow minors to petition for protection orders [2009]⁶⁰
 - Allow victims to petition for restraining order against a minor [2009]⁶⁰

- Require school curricula to address dating violence [2010]⁵⁹

YOUTH DEVELOPMENT

State Choices to Promote Access

Educational Attainment

- Set minimum compulsory completion age of high school at 18 or older [2010]³⁷
- Provide funding for after-school/out-of-school time programs for youth [2010]⁶¹
- Fund mentoring initiatives [2010]³⁹
- Allow undocumented immigrants to receive in-state tuition [2008]⁴⁰
- Provide Educational and Training Vouchers or tuition waivers for foster youth seeking post-secondary education [2010]⁶²

Transition to Adulthood

- Fund a career and technical education office within its education department [2010]⁴²

State Choices to Promote Quality

Educational Attainment

- Fund afterschool/out-of-school time program evaluation initiative for youth [2010]⁴³
- Use the Compact Rate formula to measure graduation rate [2010]⁷⁰

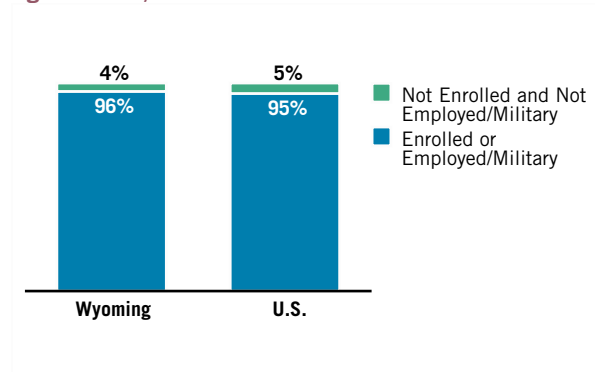
Transition to Adulthood

- Have a career and technical education office that partners with communities to offer internship programs [2010]⁴⁵
- Collaborate with private sector to expand job opportunities for youth aging out of foster care [2010]⁷¹
- Provide aftercare services to ease transition from juvenile justice system, including education, life skills training, vocational training, and counseling services [2010]⁴²
- Allow foster youth aging out of system to voluntarily retain state guardianship until age 21 [2009]⁶³

Law and Legislation

- Have a legislative youth advisory council or commission [2009]⁶⁴

School Enrollment/Employment Status Among Adolescents Aged 16-18, 2008¹



DATA NOTES AND SOURCES

1. State data were calculated from the Annual Social and Economic Supplement (the March supplement) of the Current Population Survey from 2007, 2008, and 2009, representing information from calendar years 2006, 2007, and 2008. NCCP averaged three years of data because of small sample sizes in less populated states. The national data were calculated from the 2009 data, representing information from the previous calendar year.
2. Race/ethnicity estimates were excluded if the unweighted sample size in the denominator was less than 50.

State data were calculated from the Annual Social and Economic Supplement (the March supplement) of the Current Population Survey from 2007, 2008, and 2009, representing information from calendar years 2006, 2007, and 2008. NCCP averaged three years of data because of small sample sizes in less populated states. The national data were calculated from the 2009 data, representing information from the previous calendar year.
3. National data were calculated from the Annual Social and Economic Supplement (the March supplement) of the Current Population Survey from 2010, representing information from the previous calendar year. State data were calculated from the 2009 American Community Survey, representing information from 2009.
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5. National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.
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9. Centers for Disease Control and Prevention, Childcare and School Vaccination Requirements. 2008. Summary of Vaccination Requirements by Vaccine or Antigen 2007-2008. Accessed Aug. 16, 2010, from www2a.cdc.gov/nip/schoolsurv/CombinedLaws2007.pdf.
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23. Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 3.2.2. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
24. Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
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36. Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
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41. National Resource Center for Youth Development: State by State Fact Pages. Accessed April 28, 2010, from www.nrcyd.ou.edu/state-pages/search/tuition_waiver.
42. Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
43. Data unavailable for many states.

Measuring Results: Research and Program Evaluation. Administration for Children and Families. U.S. Department of Health & Human Services website. Accessed June 22, 2010, from nccic.org/afterschool/results.php?category=41&state=.
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Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
46. Status subject to changes due to the provision in the Fostering Connections to Success Act which will allow states to claim Title IV-E funding for foster youth until age 21, beginning Oct. 2010.

Casey Family Programs. State Child Welfare Policy Database. Accessed Aug. 9, 2010, from www.childwelfarepolicy.org/pages/map.cfm.
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Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
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52. No explicit policy, but minors may be able to consent to care based on the constitutional right of privacy, if the site is funded under the federal Title X Family Planning Program, or services are paid for by Medicaid.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

53. Only 12 or older and the physician may be able to inform parents.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
54. Except in cases of medical emergency or by judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
55. Data not available.
- Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.
56. Only if 14 or older.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
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- Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.
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- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.
60. Data not available.
- Many states do not explicitly specify.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
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- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
62. National Resource Center for Youth Development: State by State Fact Pages. Accessed April 28, 2010, from www.nrcyd.ou.edu/state-pages/search/tuition_waiver.
- State ETV Programs. 2010. ETV Program website. Accessed February 11, 2011, from www.statevoucher.org/state_not_in_service.shtml.
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- Dworsky, Amy; Havlicek, Judy. 2009. Review of State Policies and Programs to Support Young People Transitioning Out of Foster Care. Chicago: Chapin Hall at the University of Chicago.
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- Individual state legislature homepages.
65. Data not available.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

66. A minor may consent to STI services, and implicitly to HIV testing/treatment.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

67. Parental consent requirement found unconstitutional and unenforceable. Not in effect.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

68. No explicit policy, but minors can consent to general medical care only if parent or guardian cannot be contacted or is unwilling to grant or withhold consent, or in the case of an emergency.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

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Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

70. Plans to implement in 2011.

Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.

71. Data not available.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

72. There is a special pre-release process set up with the Arizona Department of Juvenile Corrections to begin the application process about 30 days prior to the expected release date. In most instances, this enables re-establishment of eligibility and enrollment to be posted the date of release.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

73. A minor may consent to STI services, and to HIV testing/treatment if he or she can make informed consent.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

74. No explicit policy, but minors can generally consent if able to provide informed consent.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

75. Except in cases of medical emergency, sexual abuse or incest by a member of the family, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

76. No explicit policy.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition.

Center for Adolescent Health and the Law.

77. Only if 12 or older.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

78. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 1 1/2, or can attain speeds greater than 25 mph are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

79. State Medicaid agency is looking into feasibility of instituting a suspension policy.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

80. A small group of foster care children can continue in their U-18 and Medically Needy Foster Care categories and receive Medicaid until they are 21 years old.

Kaiser Commission on Medicaid and the Uninsured, Challenges of Providing Health Coverage for Children and Parents in a Recession: A 50 State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2009. State Income Eligibility Guidelines for Children's Regular Medicaid, Children's SCHIP-funded Medicaid Expansions and Separate SCHIP Programs (Percent of the Federal Poverty Line) January 2009. (Table 1). Accessed Aug. 16, 2010, from www.kff.org/medicaid/upload/7855_TABLES.pdf.

81. A minor may consent to STI services, and implicitly to HIV testing/treatment. The physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

82. No explicit policy, but minors can generally consent to most care if they can provide informed consent.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

83. Secondary enforcement only.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

84. The California Department of Health Services is in the process of implementing policies and procedures to allow for the suspension of Medicaid eligibility when youth enter a public institution.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

85. Only 12 or older.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

86. The Mental Health Services Act provides funding for the expansion of mental health services for adults and children, however does not include explicit SEL focus.

Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.

87. Only if the minor 12 or older can provide informed consent and would present a danger of serious mental or physical harm to self or others without care, or is the alleged victim of incest or abuse.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
88. The California legislature expressed its intent that schools receiving funds pursuant to the Carl Washington School Safety and Violence Prevention Act provide age-appropriate instruction in domestic and dating violence prevention.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.
89. First 12 months, except family.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
90. At age 12.
- Many states do not explicitly specify.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
91. The Colorado Department of Health Care Policy and Financing is in the process of implementing policies and procedures to allow for the suspension of Medicaid eligibility when youth enter a public institution.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
92. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.5. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
- Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.6. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
93. Personal communication from the state indicates that this policy is not in place, as of October 2010. There are no codes specifically designed for SBHCs, although the physicians who work at the SBHCs can bill under their codes.
- Schlitt, John J.; Juszczak, Linda J.; Eichner, Nancy Haby. 2008. Current Status of State Policies that Support School-Based Health Centers. Public Health Reports 123(6): 731-738.
94. Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 3.3. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
95. Physician may be able to inform parents of minor's decision to consent to HIV/AIDS services if the minor is younger than 16.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
96. Except in cases of medical emergency, reported cases of child abuse or neglect, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

97. Personal communication from the state indicates that this policy is in place, as of October 2010.

Centers for Disease Control and Prevention. 2007. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 5.5. Accessed Nov. 18, 2009, from www.cdc.gov/HealthyYouth/shpps/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

98. Personal communication from the state indicates that this policy is in place, as of October 2010.

Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.

99. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 3.2.2. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

100. Only if 15 or older, with limitations on the use of electroconvulsive treatment.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

101. Personal communication from the state indicates that this policy is not in place, as of October 2010.

States With Safe Schools Laws. Gay, Lesbian and Straight Education Network website. Accessed May 26, 2010, from www.glsen.org/cgi-bin/iowa/all/library/record/2344.html?state=media&type=media.

102. Personal communication from the state indicates that this policy is in place, as of October 2010.

Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

103. Personal communication with the state indicates that this policy is in place, as of October 2010.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

104. Plans to implement in 2011. Personal communication with the state indicates that this policy is in place, as of October, 2010.

Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.

105. Reinstates Medicaid if the individual is released within 24 months and contacts the Department of Social Services for assistance within 30 days of release.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

106. Physician must work toward involving a minor's parent in decision to seek treatment unless he or she feels the minor will not seek, pursue, or continue treatment if parents are notified and requests that they not be notified. A physician may inform parents if under 16 and receiving treatment for HIV.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

107. Only in certain circumstances, with limitations on duration and type of care.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

108. Learners permit.
Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
109. Only 4 months with driver education.
Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
110. Only nighttime restriction.
Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
111. Medicaid eligibility is 200% FPL for children 0-1, 133% FPL children 1-5, 100% FPL children 6-19.
Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.
112. The state exclusively funds its own program for immigrant children. Coverage is subject to availability of funds.
National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-immigrants-in-states-2010-07-28.pdf.
Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.
113. Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
114. Only if 12 or older.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
115. Only if 12 or older.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
116. Only if 12 or older and the physician may be able to inform parents.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
117. Only if 16 or older, except in cases of medical emergency or judicial bypass.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
118. All LPCs except motorized scooters are covered by the motorcycle helmet law; bicycle helmet acceptable for motorized scooter.
Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
119. Learners permit and intermediate license.
Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
120. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 1 1/2, or can attain speeds greater than 35 mph are covered by the motorcycle helmet law.
Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
121. A few counties use local funds to provide coverage to children regardless of immigration status.
National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance

Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.

Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.

122. The Florida Agency for Health Care Administration is in the process of implementing policies and procedures to allow for the suspension of Medicaid eligibility when youth enter a public institution.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

123. Unless the physician believes the minor may suffer probable health hazards in absence of services.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

124. Except in cases of medical emergency, judicial bypass, or notice not possible after a reasonable effort has been made.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

125. Only if 13 or older, with limitations on duration and type of care.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

126. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 2, or can attain speeds greater than 30 mph and all low-power cycles operated by those 15 and younger are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

127. A 2011 scan of state laws suggests that Florida may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

128. No passenger restriction.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

129. A child aging out of IV-E Medicaid can sign a consent form to remain in foster care and receive Medicaid coverage up to 21.

Kaiser Commission on Medicaid and the Uninsured, Challenges of Providing Health Coverage for Children and Parents in a Recession: A 50 State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2009. State Income Eligibility Guidelines for Children's Regular Medicaid, Children's SCHIP-funded Medicaid Expansions and Separate SCHIP Programs (Percent of the Federal Poverty Line) January 2009. (Table 1). Accessed Aug. 16, 2010, from www.kff.org/medicaid/upload/7855_TABLES.pdf.

130. Except in cases of medical emergency or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

131. Georgia law requires the Board of Education to develop a program for preventing teen dating violence for grades 8-12. It is unclear whether the Board has developed such a program.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdntm_catA.

132. First 12 months.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

133. Hawaii's detention facility, which is not a correctional facility, is administered by the Family Court system. Children are placed in the facility for different reasons and, in many cases, may continue to be eligible for Medicaid/CHIP.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

134. Only if 14 or older. Physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

135. Only if 14 or older and the physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

136. No explicit policy requiring parental consent.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

137. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 2, or can attain speeds greater than 30 mph are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

138. No statewide cell phone bans, but all of the state's counties have distracted driving ordinances.

Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.

139. Except household members.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

140. Only if 14 or older.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

141. Except in cases of medical emergency, rape, incest, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

142. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 5, or can attain speeds greater than 30 mph are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

143. The text of the civil domestic violence law does not exclude same-sex couples; however, when the law was adopted, the Idaho legislature stated that the law was intended for opposite-sex couples.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

144. Plans to implement in 2014.

Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.

145. Copays and premiums are required for certain families, based on their income.

National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.

Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.

146. Only if a minor has a referral or when failure to provide services would create a serious health hazard.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

147. Only if 12 or older to consent to STI services, and implicitly to HIV testing/treatment. The physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

148. Except in cases of medical emergency, physical or sexual abuse or neglect by a family member, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

149. Only if 12 or older, with limitations on duration and type of care.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

150. A 2011 scan of state laws suggests that Illinois may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

151. Illinois law permits the inclusion of teen dating violence as part of the curriculum for grades 8-12.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdntbm_catA.

152. 10pm Sun-Thu, 11pm Fri-Sat.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

153. Medicaid eligibility is 200% FPL for children 0-1, 150% FPL for children 1-19.

Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.

154. Personal communication from the state indicates that this policy is in place, as of October 2010.

National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.

Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.

155. If the individual is released within 12 months, they do not have to reapply for Medicaid, but will need to report being released to the Division of Family Resources. Reports of release are also accepted from the Indiana Department of Corrections. If the report of release is made within 40 days of the release date, Medicaid coverage will be available upon release. If the report is more than 40 days, there may be a period of time before benefits can be restored.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal

interviews, or telephone conversations).

156. Personal communication from the state indicates that this policy is in place, as of October 2010.
Centers for Disease Control and Prevention, Childcare and School Vaccination Requirements. 2008. Summary of Vaccination Requirements by Vaccine or Antigen 2007-2008. Accessed Aug. 16, 2010, from www2a.cdc.gov/nip/schoolsurv/CombinedLaws2007.pdf.
157. Personal communication from the state indicates that this policy is not in place, as of October 2010.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
158. Personal communication from the state indicates that this policy is in place, as of October 2010.
U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. 2009. The Annual EPSDT Report (Form CMS-416). Accessed July 27, 2010, from www.cms.gov/MedicaidEarlyPeriodicScrn/downloads/508_416_Form_3-05.pdf.
159. Personal communication from the state indicates that this policy is in place, as of October 2010.
State Policies Related to Student Health and Nutrition. 2005. Education Commission of the States website. Accessed Feb. 3, 2010, from www.ecs.org/clearinghouse/61/75/6175.htm.
160. SEL is embedded in the Indiana education system, however not explicitly required. Additionally, results of the Indiana State Assembly's previous efforts toward a Children's Social, Emotional, and Behavioral health Plan are unclear.
Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.
161. Only from the state or other approved facilities.
Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
162. 10pm for first 180 days, then 11pm Sun-Fri, 1am Sat-Sun.
Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
163. First 180 days.
Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
164. Personal communication with the state indicates that this policy is in place, as of October 2010.
Data unavailable for many states.
Measuring Results: Research and Program Evaluation. Administration for Children and Families. U.S. Department of Health & Human Services website. Accessed June 22, 2010, from nccic.org/afterschool/results.php?category=41&state=.
165. Medicaid eligibility is 200% FPL for children 0-1, 133% FPL children 1-19.
Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.
166. If minor tests positive for HIV, parents will be notified.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
167. Except in cases of medical emergency, child abuse, sexual abuse, or judicial bypass.
English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
168. Restricted or intermediate license.
Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

169. Secondary enforcement only.
- Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.
170. Only when no parent or guardian is available.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
171. A mature minor may consent to contraceptive services and other minors may be able to consent to care based on the constitutional right of privacy, if the site is funded under the federal Title X family planning program, or services are paid for by Medicaid.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
172. Except in cases of medical emergency, incest, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
173. Only if 14 or older, with parental notification.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
174. Learner or intermediate license.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
175. Personal communication with the state indicates that this policy is in place, as of October 2010.
- Administration for Children and Families: Child Care Bureau. Afterschool Investments - Settings and Activities: Mentoring. Accessed May 5, 2010, from www.nccic.acf.hhs.gov/afterschool/results.php?category=8&state=.
176. Physician may be able to inform parents.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
177. Only if 16 or older.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
178. Personal communication with the state indicates that this policy is not in place, as of October 2010.
- Administration for Children and Families: Child Care Bureau. Afterschool Investments - Settings and Activities: Mentoring. Accessed May 5, 2010, from www.nccic.acf.hhs.gov/afterschool/results.php?category=8&state=.
179. Plans to implement in 2013.
- Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.
180. Only covers children who have been in the country five or more years.
- National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.
- Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.
181. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Kaiser Commission on Medicaid and the Uninsured, Challenges of Providing Health Coverage for Children and Parents in a Recession: A 50 State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid

and SCHIP in 2009. State Income Eligibility Guidelines for Children's Regular Medicaid, Children's SCHIP-funded Medicaid Expansions and Separate SCHIP Programs (Percent of the Federal Poverty Line) January 2009. (Table 1). Accessed Aug. 16, 2010, from www.kff.org/medicaid/upload/7855_TABLES.pdf.

182. Personal communication from the state indicates that this policy is in place, as of October 2010.

Centers for Disease Control and Prevention. 2007. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 2.9. Accessed Nov. 18, 2009, from www.cdc.gov/HealthyYouth/shpps/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

183. Personal communication from the state indicates that this policy is in place, as of October 2010.

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 4.5. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

184. A 2011 scan of state laws suggests that Louisiana may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

185. Personal communication from the state indicates that this policy is in place, as of October 2010.

States With Safe Schools Laws. Gay, Lesbian and Straight Education Network website. Accessed May 26, 2010, from www.glsen.org/cgi-bin/iowa/all/library/record/2344.html?state=media&type=media.

186. Law specifies that to qualify for a domestic violence protection order as a cohabitant, the victim must be living with an abuser of the opposite sex.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

187. No explicit policy, but minors may be able to consent to care based on the constitutional right of privacy, if the site is funded under the federal Title X Family Planning Program, or services are paid for by Medicaid. Physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

188. Personal communication from the state indicates that this policy is in place, as of October 2010.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

189. Minor must receive counseling on available services and alternatives.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

190. Personal communication from the state indicates that this office is not in place, as of October 2010.

Schlitt, John J.; Juszczak, Linda J.; Eichner, Nancy Haby. 2008. Current Status of State Policies that Support School-Based Health Centers. *Public Health Reports* 123(6): 731-738.

191. All LPCs with an engine displacement greater than 50cc or more than 1,500 watts are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr. 16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

192. A 2011 scan of state laws suggests that Maine may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

193. A minor may consent to STI services, and implicitly to HIV testing/treatment. Physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

194. Minor must be mature or circumstances must meet certain criteria.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

195. All LPCs designed to travel at speeds exceeding 35 mph, scooters with with engine displacement greater than 50cc or brake horsepower greater than 2.7 and mopeds with an engine displacement greater than 50cc or brake horsepower greater than 1.5 are covered by the motorcycle helmet law.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
196. Learner or provisional license, secondary enforcement only.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
197. First 5 months.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
198. Maryland allows Juvenile Peace Orders to be issued against minors. These are heard in Juvenile Court, not District Court.
- Many states do not explicitly specify.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
199. Physician may be able to inform parents if your health or life are at risk.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
200. Bill approved in March 2010 that will include guidelines for the implementation of SEL curricula for grades K-12 no later than June 30, 2011.
- Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.
201. Only if 12 or older and found drug dependent by 2 physicians.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
202. Youth not eligible if incarcerated. If a child is living in a youth home facility, they may be eligible for MICHild or for Healthy Kids.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
203. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Schlitt, John J.; Juszczak, Linda J.; Eichner, Nancy Haby. 2008. Current Status of State Policies that Support School-Based Health Centers. Public Health Reports 123(6): 731-738.
204. Except in cases of medical emergency, sexual abuse, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
205. Only if 14 or older, with limitations on duration and type of care.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
206. Age 10 and above.
- Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

207. Children who are placed by a juvenile court in certain juvenile programs may be eligible depending on the type of facility.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

208. Personal communication from the state indicates that this policy is not in place, as of October 2010. CHIP only extends to age 2. Minnesota's Family Planning Waiver Program, referred to as the Minnesota Family Planning Program, provides family planning access to low income women and men ages 15-50.

Gold, Rachel Benson; Sonfield, Adam. 2001. Reproductive Health Services for Adolescents Under the State Children's Health Insurance Program. *Family Planning Perspectives* 33(2):83-87.

Medicaid Cuts: Benefits May Be Reduced for Women. 2006. National Women's Law Center website. Accessed Mar. 5 2010, from www.nwlc.org/pdf/FSMedicaidandtheDRA_04.21.06.pdf.

209. Except in cases of medical emergency, sexual abuse, neglect, physical abuse, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. *State Minor Consent Laws: A Summary*, 3rd Edition. Center for Adolescent Health and the Law.

210. Learner or provisional license.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

211. A 2011 scan of state laws suggests that Minnesota may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

212. At age 16.

Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

213. Personal communication with the state indicates that this policy is not in place, as of October 2010.

Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.

214. Only if minor has a referral.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. *State Minor Consent Laws: A Summary*, 3rd Edition. Center for Adolescent Health and the Law.

215. A minor may consent to STI services, and implicitly to HIV testing/treatment.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. *State Minor Consent Laws: A Summary*, 3rd Edition. Center for Adolescent Health and the Law.

216. Both parents must consent, except in specified circumstances. Exceptions to parental consent requirement in cases of medical emergency, incest, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. *State Minor Consent Laws: A Summary*, 3rd Edition. Center for Adolescent Health and the Law.

217. Only if 15 or older.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. *State Minor Consent Laws: A Summary*, 3rd Edition.

Center for Adolescent Health and the Law.

218. Learner or provisional license.

Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.

219. Explicit "cyberstalking" statute specifically deals with some aspects of cyberstalking.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

220. 10pm Sun-Thu, 11:30 pm Fri-Sat.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

221. Except with judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

222. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 3, or can attain speeds greater than 30 mph are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

223. Must receive counseling. Physician may be able to inform parents.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

224. Only if 16 or older, or in cases of urgent need and parental consent cannot be obtained within a reasonable amount of time.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

225. Specifically offers protection only to opposite-sex couples.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

226. State exclusive funds its own program for immigrant children.

National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.

Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.

227. Except in cases of medical emergency, reported cases of sexual abuse or neglect, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

228. Nebraska law requires dating violence education and schools must adopt a policy to address incidents of dating violence at school.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.

229. Youth will not be covered if incarcerated for more than 30 days.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/

MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

230. No explicit policy, but a minor can consent to most care if in danger of suffering a serious health hazard and can provide informed consent.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

231. A 2011 scan of state laws suggests that Nevada may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.

232. Secondary enforcement only.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

233. Plans to implement in 2012.

Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.

234. Medicaid eligibility is 300% FPL for children 0-1, 185% FPL for children 1-19.

Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.

235. Juvenile youth in "staff secure" facilities (residential group homes and shelter care) may remain eligible.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

236. A minor may consent to STI services if 14 or older, and implicitly to HIV testing/treatment at the same age.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

237. No explicit policy, but a minor may apply to an approved community mental health program to receive services from the state.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

238. Only if 12 or older or can provide informed consent.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

239. Medicaid eligibility is 200% FPL for children 0-1, 133% FPL for children 1-19.

Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.

240. The facility/institution applies for Medicaid for incarcerated youth regardless of whether or not they were previously enrolled.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

241. A minor must be at least 13 years of age to consent to HIV testing/treatment. Physician may be able to inform parents.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
242. Graduated driver or provisional license.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
243. Except dependents.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
244. Courts can issue restraining orders against minor abusers only if they are emancipated.
- Many states do not explicitly specify.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
245. Plans to implement in 2012
- Curran, Bridget; Reyna, Ryan. 2010. Implementing Graduation Counts: State Progress to Date, 2010. National Governors Association: Center for Best Practices. Accessed Feb. 14, 2011, from www.nga.org/Files/pdf/1012GRADCOUNTSPROGRESS.PDF.
246. Parental notification law is not enforced.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
247. Only if 14 or older and can give informed consent. A child under 14 can consent to an initial assessment and medically necessary early intervention services with limitations on duration and type of care.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
248. Only if 14 or older and can give informed consent.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
249. All LPCs with an engine displacement greater than 50cc or can attain speeds greater than 30 mph are covered by the motorcycle helmet law.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
250. A 2011 scan of state laws suggests that New Mexico may now have such a statute in place.
- Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.
251. Children's Mental Health Act developed guidelines for voluntary implementation by school districts into elementary and secondary school education programs.
- Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes

Foundation.

252. Only if requiring parental consent would have a detrimental effect on treatment, or consent is denied and the physician finds treatment is necessary and in the best interest of the child.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

253. All LPCs designed to travel at speeds of 20 mph or greater are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

254. At 17 with driver education.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

255. Medicaid eligibility is 200% FPL for children 0-5, 100% FPL for children 6-19.

Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.

256. Except in cases of medical emergency, rape or incest, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

257. Specifically offer protection only to opposite-sex couples.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

258. Only if 14 or older to consent to STI services, and implicitly to HIV testing/treatment.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

259. Both parents must consent except in cases of medical emergency or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

260. Personal communication from the state indicates that this policy is not in place, as of December 2010.

Centers for Disease Control and Prevention. 2007. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 5.5. Accessed Nov. 18, 2009, from www.cdc.gov/HealthyYouth/shpps/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

261. Personal communication from the state indicates that this policy is not in place, as of December 2010.

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.14. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

262. Personal communication from the state indicates that this policy is not in place, as of December 2010.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

263. Personal communication from the state indicates that this policy is not in place, as of December 2010.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

264. Personal communication from the state indicates that this policy is in place, with parent or guardian, as of December 2010.

Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of

Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

265. Personal communication from the state indicates that this policy is in place, as of December 2010.

Many states do not explicitly specify.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

266. Ohio does not have statewide SEL-specific standards, however SEL initiatives do exist at the school district level.

Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.

267. Ohio law requires that dating violence prevention be included in the health education instruction for grades 7-12.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.

268. Personal communication with the state indicates that this policy is in place, as of October 2010.

National Resource Center for Youth Development: State by State Fact Pages. Accessed April 28, 2010, from www.nrcyd.ou.edu/state-pages/search/tuition_waiver.

State ETV Programs. 2010. ETV Program website. Accessed February 11, 2011, from www.statevoucher.org/state_not_in_service.shtml.

269. Personal communication with the state indicates that this policy is not in place, as of October 2010.

Status subject to changes due to the provision in the Fostering Connections to Success Act which will allow states to claim Title IV-E funding for foster youth until age 21, beginning Oct. 2010.

Casey Family Programs. State Child Welfare Policy Database. Accessed Aug. 9, 2010, from www.childwelfarepolicy.org/pages/map.cfm.

Dworsky, Amy; Havlicek, Judy. 2009. Review of State Policies and Programs to Support Young People Transitioning Out of Foster Care. Chicago: Chapin Hall at the University of Chicago.

270. Personal communication from the state indicates that this policy is in place, as of October 2010.

Children's Health Coverage State Fact Sheets, Children's Defense Fund. Children's Defense Fund website. Accessed Feb. 2, 2010, from www.childrensdefense.org/child-research-data-publications/data/state-data-repository/childrens-health-coverage-state-factsheets.html.

271. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

272. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Gold, Rachel Benson; Sonfield, Adam. 2001. Reproductive Health Services for Adolescents Under the State Children's Health Insurance Program. *Family Planning Perspectives* 33(2):83-87.

Medicaid Cuts: Benefits May Be Reduced for Women. 2006. National Women's Law Center website. Accessed Mar. 5 2010, from www.nwlc.org/pdf/FSMedicaidandtheDRA_04.21.06.pdf.

273. Must also provide counseling.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

274. A state entity that receives funds under Title X of the federal Public Health Services Act cannot require parental consent.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition.

Center for Adolescent Health and the Law.

275. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.5. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.6. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

276. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

277. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 4.5. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

278. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.14. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

279. Learners permit or intermediate license.

Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.

280. Personal communication from the state indicates that this policy is in place, as of October 2010.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

281. Personal communication from the state indicates that this policy is not in place, as of October 2010.

Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf

282. Personal communication with the state indicates that this policy is not in place, as of October 2010.

Education Commission of the States. 2008. In-state Tuition for Undocumented Immigrants. Accessed Aug. 3, 2010, from www.ecs.org/clearinghouse/75/53/7553.pdf.

283. Data previously unavailable, but personal communication with the state indicates that this policy is not in place, as of October 2010.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

284. Personal communication with the state indicates that this policy is in place, as of October 2010.

National Conference of State Legislatures. Statewide Legislative Youth Advisory Councils. Accessed Oct. 8, 2010, from www.ncsl.org/Portals/1/documents/cyf/Councils_grid.pdf.

Individual state legislature homepages.

285. Oregon does have Medicaid available for eligible youth who are in residential programs. Youth in detention (depending on the length of stay) who are on Medicaid will have their coverage either suspended or terminated.

Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.

Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).

286. Data not available.
- U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. 2009. The Annual EPSDT Report (Form CMS-416). Accessed July 27, 2010, from www.cms.gov/MedicaidEarlyPeriodicScrnr/downloads/508_416_Form_3-05.pdf.
287. Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Centers for Disease Control and Prevention. 2007. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 5.5. Accessed Nov. 18, 2009, from www.cdc.gov/HealthyYouth/shpps/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
288. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Centers for Disease Control and Prevention. 2007. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.11. Accessed Nov. 18, 2009, from www.cdc.gov/HealthyYouth/shpps/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
289. Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.
290. Only if 14 or older, with parental involvement by treatment conclusion, unless otherwise indicated.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
291. Personal communication with the state indicates that this policy is not in place, as of October 2010.
- U.S. Department of Health and Human Services. Administration for Children and Families. Afterschool Investments, State Afterschool Profile(s). Accessed Aug. 9, 2010, from nccic.acf.hhs.gov/afterschool/statep.html.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
292. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
293. Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Kaiser Commission on Medicaid and the Uninsured, Challenges of Providing Health Coverage for Children and Parents in a Recession: A 50 State Update on Eligibility Rules, Enrollment and Renewal Procedures, and Cost-Sharing Practices in Medicaid and SCHIP in 2009. State Income Eligibility Guidelines for Children's Regular Medicaid, Children's SCHIP-funded Medicaid Expansions and Separate SCHIP Programs (Percent of the Federal Poverty Line) January 2009. (Table 1). Accessed Aug. 16, 2010, from www.kff.org/medicaid/upload/7855_TABLES.pdf.
294. Funded through community service grants, not specific dedicated funding.
- Schlitt, John J.; Juszczak, Linda J.; Eichner, Nancy Haby. 2008. Current Status of State Policies that Support School-Based Health Centers. *Public Health Reports* 123(6): 731-738.
295. Legislation proposed to include SEL learning programs in schools, however status unclear. SEL concepts were embedded into "Healthy Schools! Healthy Kids!," a three-year program which has been discontinued due to lack of funding.
- Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.
296. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 3.2.2. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
297. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Centers for Disease Control and Prevention, State-Level School Health Policies and Practices. A State-by-State Summary from the

School Health Policies and Programs Study 2006. Table 3.3. Accessed July 29, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.

298. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
299. All LPCs with an engine displacement greater than 50cc, brake horsepower greater than 4.9 or can attain speeds greater than 30 mph are covered by the motorcycle helmet law.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
300. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
301. Rhode Island law requires school districts to incorporate dating violence education into the health education framework for grades 7-12, implement a dating violence policy, and provide dating violence training to school personnel in middle and high schools.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.
302. Personal communication with the state indicates that this policy is not in place, as of October 2010.
- National Conference of State Legislatures. Statewide Legislative Youth Advisory Councils. Accessed Oct. 8, 2010, from www.ncsl.org/Portals/1/documents/cyf/Councils_grid.pdf.
- Individual state legislature homepages.
303. If under 16 years old, services provided must be necessary to maintain the well-being of the minor.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
304. No specific provision, but must be 16 or older to consent to care generally.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
305. South Carolina's law applies to women under 17, except in cases of medical emergency, incest, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
306. No explicit policy, but minors can generally receive care if deemed necessary by a professional, or if 16 or older.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
307. Personal communication from the state indicates that this policy is not in place, as of October 2010.
- Many states do not explicitly specify.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
308. Personal communication with the state indicates that this policy is not in place, as of October 2010.
- National Resource Center for Youth Development: State by State Fact Pages. Accessed April 28, 2010, from www.nrcyd.ou.edu/state-pages/search/tuition_waiver.
- State ETV Programs. 2010. ETV Program website. Accessed February 11, 2011, from www.statevoucher.org/

state_not_in_service.shtml.

309. Incarcerated youth are not erased from the system, however benefits are blocked while incarcerated. Youth may retain coverage upon release if they still meet eligibility criteria.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
310. Only at an accredited facility.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
311. Only 3 months with driver education.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. Licensing Ages and Graduated Licensing Systems: Summary of all US Graduated Driver Licensing Laws. 2010. Accessed May 27, 2010, from www.iihs.org/laws/pdf/us_licensing_systems.pdf
312. TennCare (Medicaid) eligible children awaiting a hearing or trial or in a Juvenile Detention Center remain covered. Youth staying in Youth Development Centers are eligible, but only for covered services delivered to already enrolled TennCare members in inpatient medical facilities outside the YDC.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
313. Except in cases of medical emergency, pending criminal charge of incest, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
314. Only if 16 or older and with serious emotional disturbance or mental illness.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
315. Learners permit or intermediate license.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
316. Tennessee law urges the department of education to develop a sexual violence awareness curriculum that incorporates information about teen dating violence and provides resources about organizations addressing dating violence. It is unclear whether such a curriculum has been developed.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdntm_catA.
317. Lawfully residing immigrant children who entered the U.S. on or after Aug. 22, 1996, are eligible for services comparable to CHIP (during the federal 5-year bar).
- National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-immis-in-states-2010-07-28.pdf.
- Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.

318. Once released, a youth may retain their coverage if they are still eligible for Medicaid.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
319. If minor has actual custody of biological child.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
320. Personal communication from the state indicates that this office is in place, as of October 2010.
- Schlitt, John J.; Juszczak, Linda J.; Eichner, Nancy Haby. 2008. Current Status of State Policies that Support School-Based Health Centers. Public Health Reports 123(6): 731-738.
321. Only for suicide prevention or sexual, physical, or emotional abuse.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
322. Data not available.
- Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 4.5. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
323. Personal communication from the state indicates that this policy is in place, as of October 2010.
- Centers for Disease Control and Prevention. State-Level School Health Policies and Practices: A State-by-State Summary from the School Health Policies and Programs Study 2006. Table 1.14. Accessed Mar. 5, 2010, from www.cdc.gov/HealthyYouth/SHPPS/2006/summaries/pdf/State_Level_Summaries_SHPPS2006.pdf.
324. All LPCs, except motor assisted scooters with an engine displacement less than than 40cc, are covered by the motorcycle helmet law.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
325. Intermediate state (first year).
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
326. Intermediate stage, first 12 months only.
- Governors Highway Safety Association: The States' Voice on Highway Safety. 2010. Cell Phone and Texting Laws website. Accessed Apr. 16, 2010, from www.ghsa.org/html/stateinfo/laws/cellphone_laws.html.
327. Texas law requires school districts to implement a dating violence policy, which includes school personnel training and student and parent awareness education.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdnbtm_catA.
328. Except in cases of medical emergency, abuse, neglect, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
329. No explicit policy.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
330. A 2011 scan of state laws suggests that Utah may now have such a statute in place.
- Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.
331. Must be 12 or older consent to STI services, and implicitly to HIV testing/treatment.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
332. Only if 12 or older and deemed necessary by physician.
- Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
333. Except in cases of medical emergency, reported cases of abuse and neglect, or judicial bypass.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
334. All LPCs operated at speeds greater than 35 mph or with an engine displacement greater than 50cc are covered by the motorcycle helmet law.
- Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.
335. Virginia law requires the Board of Education to develop curriculum guidelines for family life education curriculum in grades k-12, including age-appropriate instruction around dating violence.
- Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.
- State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdntbm_catA.
336. Children in families earning up to 250% of the federal poverty level are eligible for Children's Healthcare Programs, regardless of their immigration status.
- National Immigration Law Center, Guide to Immigrant Eligibility for Federal Programs: Update Page. 2010. Medical Assistance Programs for Immigrants in Various States. Accessed Aug. 2, 2010, from www.nilc.org/pubs/guideupdates/med-services-for-imms-in-states-2010-07-28.pdf.
- Wiley, Dinah, National Immigration Law Center. Aug. 2, 2010. Personal communication.
337. State Medicaid agency looking into feasibility of instituting a suspension policy.
- Kaye, Neva; Zemel, Sarabeth. 2009. Medicaid Eligibility, Enrollment, and Retention Policies: Findings from a Survey of Juvenile Justice and Medicaid Policies Affecting Children in the Juvenile Justice System (Models for Change: Systems Reform in Juvenile Justice). National Academy for State Health Policy. Accessed July 21, 2010, from www.nashp.org/sites/default/files/MacFound11-09.pdf.
- Personal communication with state agency: includes private letters, memos, some electronic communication (i.e. email, personal interviews, or telephone conversations).
338. No explicit policy but Washington Supreme Court held that a minor's privacy right to pregnancy care cannot be subjected to an absolute parental veto.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
339. No explicit policy but Washington Supreme Court held that a minor's privacy right to contraceptive care cannot be subjected to an absolute parental veto.
- English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.
340. Only if 13 or older.

Many states generally allow emancipated minors, married minors, pregnant minors, minor parents, or other subgroups to consent for their own health care.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

341. Learner permit or intermediate stage.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

342. Washington law requires the development of a family preservation education program model curriculum that includes instruction on domestic and dating violence. It is unclear whether this program has been implemented.

Break the Cycle: Empowering Youth to End Domestic Violence. 2009 and 2010 State Law Report Cards: A National Survey of Teen Dating Violence Laws. Accessed May 27, 2010, from www.breakthecycle.org/system/files/pdf/2010-Dating-Violence-State-Law-Report-Card-Full-Report.pdf.

State School Healthy Policy Database: Injury and Violence Prevention. 2010. National Association of State Boards of Education. Accessed February 18, 2010 from nasbe.org/healthy_schools/hs/bytopics.php?topicid=1170&catExpand=acdntm_catA.

343. Except in cases of medical emergency or judicial bypass. Law also allows specified health professionals to waive parental involvement on the basis of the minor's maturity or best interests.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

344. Except in cases of medical or psychological emergency, reported sexual abuse or incest, or judicial bypass.

English, Abigail; Bass, Lindsay; Boyle, Alison Dame; Eshragh, Felicia. 2010. State Minor Consent Laws: A Summary, 3rd Edition. Center for Adolescent Health and the Law.

345. Standards of the Heart initiative aimed to encourage SEL in schools, however standards not mandated. Legislation in the works that may be relevant.

Palmer, Kara. 2010. A Study of Statewide Social and Emotional Learning Policy and Practices: Prepared for the Raikes Foundation.

346. All LPCs designed to travel at speeds exceeding 30 mph or a Type 1 motorcycle with an automatic transmission with an engine displacement greater than 50cc are covered by the motorcycle helmet law.

Insurance Institute for Highway Safety, Highway Loss Data Institute. 2010. Current US Motorcycle and Bicycle Helmet Laws website. Accessed Apr.16, 2010, from www.iihs.org/laws/HelmetUseCurrent.aspx.

347. A 2011 scan of state laws suggests that Wyoming may now have such a statute in place.

Goodno, Naomi H. 2006. Cyberstalking, a New Crime: Evaluating the Effectiveness of Current State and Federal Laws, Berkeley Electronic Press Legal Series, Paper 1689. Accessed June 22, 2010, from Law.bepress.com/cgi/viewcontent.cgi?article=7936&context=expresso.