

Montpelier Roxbury Public Schools

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Our schools are caring, creative, and equitable communities that empower all children to build on their talents and passions to grow into engaged citizens and life-long learners.

Needed clarification of expectations in the law:

Quick Google search of over-the-counter contraception included:

1. Male condoms
2. Female condoms (21% failure rate)
3. Spermicides (28% failure rate)
 - a. Foams
 - b. Suppositories
 - c. Gels
 - d. Creams
 - e. Films
4. Contraceptive sponge
5. Emergency contraception (morning after pill)

New versions of bills further define this by stating barrier methods which I'm assuming are male and female condoms. This needs to be clearly delineated.

School concerns around legality:

In Vermont, it is illegal for an adult (someone 18 or older) to have sex with a minor (someone **16 or younger**), even if the sex is consensual. Those who break the law have committed statutory rape.

- We're talking mainly about the spring of sophomore year, juniors, and seniors--will access be limited to this group?

2019 Youth Risk Behavior Survey and other Data tell a good picture of current reality:

- Use of condom/birth control has significantly increased since 2013 while the number of students reporting having engaged in sexual activity has not changed since 2007 (31%).
- Since 2013 Use of birth control among sexually active students significantly increased from 44% to 56% in 2019
 - use of condom as primary prevention method has significantly decreased during that same period-41%-32%
 - Condom usage was unchanged between 2017 and 2019

- 2019 56% of sexually active students reported using contraception to prevent pregnancy
 - Female students significantly more likely than males
 - Increases by grade

Teen pregnancy rate (most recent data)- Vermont ranked 4th lowest teen pregnancy rate in all 50 states