



SIECUS

Sexuality Information and Education
Council of the United States

State Profiles FISCAL YEAR 2016

NORTH DAKOTA

In Fiscal Year 2016,¹ the state of North Dakota received:

- Division of Adolescent and School Health funds totaling \$65,000
- Title V State Abstinence Education Program funds totaling \$90,145

In Fiscal Year 2016, local entities in North Dakota received:

- Competitive Personal Responsibility Education Program funds totaling \$250,000

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

As a result of [North Dakota Century Code Title 15.1-21-24](#), beginning July 1, 2012, every school district, both public and nonpublic, was required to include abstinence “education” in its health education curriculum. Each school district needs to ensure that the portion of its health curriculum related to sexual health includes instruction pertaining to “the risks associated with adolescent sexual activity and the social, psychological, and physical health gains to be realized by abstaining from sexual activity before and outside of marriage.”²

STATE STANDARDS

In 2008, the North Dakota Department of Public Instruction published the [North Dakota Health Content and Achievement Standards](#), which established benchmarks for health instruction at all grade levels. For example, in grade 5, students are expected to be able to “[d]escribe changes that occur during puberty.” The standards address “sexual behavior” beginning in grades seven and eight.³ The alignment of a school district’s health curriculum with the 2008 *North Dakota Health Content and Achievement Standards* is intended to be used as assurance that schools are in compliance with the law.

STATE LEGISLATIVE SESSION ACTIVITY

SIECUS tracks all state legislative session activity in our state legislative reports. For more information on bills related to school-based sexuality education that were introduced or passed in 2016, please see [SIECUS’ 2016 Sex Ed State Legislative Year-End Report: Top Topics and Takeaways](#).

YOUTH SEXUAL HEALTH DATA

The following sexual health behavior and outcome data represent the most recent information available on adolescent sexual health in North Dakota. While data can be a powerful tool to demonstrate the sexuality

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education and sexual health care needs of young people, it is important to be mindful that these behaviors and outcomes are impacted by systemic inequities present in our society that can and often do affect an individual's sexual health and wellbeing. Additionally, there are significant limitations as to how and what data are currently collected. Young people are more than outcomes; for advocates, it is important to utilize the data in a manner that tracks our progress and pushes policies forward in a way that respects and supports the dignity of all young lives.

NORTH DAKOTA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA⁴

Reported ever having had sexual intercourse

- In 2015, 38.6% of female high school students and 39.2% of male high school students in North Dakota reported ever having had sexual intercourse, compared to 39.2% of female high school students and 43.2% of male high school students nationwide.
- In 2015, 42.8% of lesbian, gay, or bisexual (LGB) high school students, 35.7% of high school students who were unsure of their sexual orientation, and 38.7% of heterosexual high school students in North Dakota reported ever having had sexual intercourse, compared to 50.8% of LGB high school students, 31.6% of high school students who were unsure of their sexual orientation, and 40.9% of heterosexual high school students nationwide.
- In 2015, 52.9% of Hispanic high school students and 36% of white high school students in North Dakota reported ever having had sexual intercourse, compared to 42.5% of Hispanic high school students and 39.9% of white high school students nationwide.

Reported having had sexual intercourse before age 13

- In 2015, 0.9% of female high school students and 4.3% of male high school students in North Dakota reported having had sexual intercourse before age 13, compared to 2.2% of female high school students and 5.6% of male high school students nationwide.
- In 2015, 6.4% of LGB high school students, 10.4% of high school students who were unsure of their sexual orientation, and 2.1% of heterosexual high school students in North Dakota reported having had sexual intercourse before age 13, compared to 7.3% of LGB high school students, 8.8% of high school students who were unsure of their sexual orientation, and 3.4% of heterosexual high school students nationwide.
- In 2015, 5.1% of Hispanic high school students and 1.7% of white high school students in North Dakota reported having had sexual intercourse before age 13, compared to 5% of Hispanic high school students and 2.5% of white high school students nationwide.

Reported being currently sexually active

- In 2015, 30.5% of female high school students and 28.9% of male high school students in North Dakota reported being currently sexually active, compared to 29.8% of female high school

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students and 30.3% of male high school students nationwide.

- In 2015, 31.7% of LGB high school students, 20.6% of high school students who were unsure of their sexual orientation, and 29.8% of heterosexual high school students in North Dakota reported being currently sexually active, compared to 35.1% of LGB high school students, 22.9% of high school students who were unsure of their sexual orientation, and 30.1% of heterosexual high school students nationwide.
- In 2015, 36.8% of Hispanic high school students and 28.1% of white high school students in North Dakota reported being currently sexually active, compared to 30.3% of Hispanic high school students and 30.3% of white high school students nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 39.8% of female high school students and 37.5% of male high school students in North Dakota reported not using a condom during their last sexual intercourse, compared to 48% of female high school students and 38.5% of male high school students nationwide.
- In 2015, 48.2% of LGB high school students and 37.7% of heterosexual high school students in North Dakota reported not using a condom during their last sexual intercourse, compared to 52.5% of LGB high school students and 42.2% of heterosexual high school students nationwide.
- In 2015, 37.6% of white high school students in North Dakota reported not using a condom during their last sexual intercourse, compared to 43.2% of white high school students nationwide.

Reported having been physically forced to have sexual intercourse

- In 2015, 9.8% of female high school students and 3% of male high school students in North Dakota reported having been physically forced to have sexual intercourse, compared to 10.3% of female high school students and 3.1% of male high school students nationwide.
- In 2015, 16.2% of LGB high school students, 18.8% of high school students who were unsure of their sexual orientation, and 5.2% of heterosexual high school students in North Dakota reported having been physically forced to have sexual intercourse, compared to 17.8% of LGB high school students, 12.6% of high school students who were unsure of their sexual orientation, and 5.4% of heterosexual high school students nationwide.
- In 2015, 11.8% of American Indian/Native Alaskan (AI/NA) high school students, 12.4% of Hispanic high school students, and 5.1% of white high school students in North Dakota reported having been physically forced to have sexual intercourse, compared to 6.6% of AI/NA high school students, 7% of Hispanic high school students, and 6% of white high school students nationwide.

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Reported experiencing physical dating violence

- In 2015, 9.6% of female high school students and 5.6% of male high school students in North Dakota reported experiencing physical dating violence in the prior year, compared to 11.7% of female high school students and 7.4% of male high school students nationwide.
- In 2015, 20.7% of LGB high school students, 16.9% of high school students who were unsure of their sexual orientation, and 6.4% of heterosexual high school students in North Dakota reported experiencing physical dating violence in the prior year, compared to 17.5% of LGB high school students, 24.5% of high school students who were unsure of their sexual orientation, and 8.3% of heterosexual high school students nationwide.
- In 2015, 6.5% of white high school students in North Dakota reported experiencing physical dating violence in the prior year, compared to 9% of white high school students nationwide.

Visit the Centers for Disease Control and Prevention's (CDC) [Youth Online](#) database and [Health Risks Among Sexual Minority Youth](#) report for additional information on sexual behaviors.

NORTH DAKOTA TEEN PREGNANCY, HUMAN IMMUNODEFICIENCY VIRUS (HIV)/ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS), AND OTHER SEXUALLY TRANSMITTED DISEASE (STD) DATA

Teen Pregnancy, Birth, and Abortion

- In 2011, North Dakota had the 40th highest teen pregnancy rate in the United States, with a rate of 40 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.⁵ There were a total of 920 pregnancies among young women ages 15–19 reported in North Dakota in 2011.⁶
- In 2015, North Dakota had the 25th highest teen birth rate in the United States, with a rate of 22.2 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.⁷ There were a total of 564 live births to young women ages 15–19 reported in North Dakota in 2014, the most recent year of available data.⁸
- In 2011, North Dakota had the 42nd highest teen abortion rate in the United States, with a rate of 6 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.⁹ There were a total of 130 abortions among young women ages 15–19 reported in North Dakota in 2011.¹⁰

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in North Dakota was 1.5 per 100,000, compared to the national rate of 5.8 per 100,000.¹¹
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in North Dakota was 0.0 per 100,000, compared to the national rate of 0.7 per 100,000.¹²

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- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in North Dakota was 5.5 per 100,000, compared to the national rate of 31.1 per 100,000.¹³
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in North Dakota was 0.0 per 100,000, compared to the national rate of 5.6 per 100,000.¹⁴

STDs

- In 2015, North Dakota had the 41st highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 1,406.6 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 691 cases of chlamydia among young people ages 15–19 reported in North Dakota.¹⁵
- In 2015, North Dakota had the 38th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 187.3 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 92 cases of gonorrhea among young people ages 15–19 reported in North Dakota.¹⁶
- In 2015, North Dakota had the 39th highest rate of reported cases of primary and secondary syphilis among young people ages 15–19 in the United States, with an infection rate of 2.0 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 1 case of syphilis reported among young people ages 15–19 in North Dakota.¹⁷

Visit the Office of Adolescent Health’s (OAH) [North Dakota Adolescent Health Facts](#) for additional information.

FEDERAL FUNDING FOR SEXUALITY EDUCATION, UNINTENDED TEEN PREGNANCY, HIV AND OTHER STD PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

FISCAL YEAR 2016 FEDERAL FUNDING IN NORTH DAKOTA

Grantee	Award
Division of Adolescent and School Health (DASH)	
North Dakota Department of Public Instruction	\$65,000
TOTAL	\$65,000
Personal Responsibility Education Program (PREP)	
Competitive Personal Responsibility Education Program (CPREP)	
North Dakota State University	\$250,000
TOTAL	\$250,000
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	

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North Dakota State Department of Public Health (federal grant)	\$90,145
TOTAL	\$90,145
GRAND TOTAL	\$405,145

DIVISION OF ADOLESCENT AND SCHOOL HEALTH

The Division of Adolescent and School Health (DASH), within the CDC, provides funding to state and local education agencies through several funding streams to better student health, implement HIV/STD prevention programs, collect and report data on young people's risk behaviors, and expand capacity-building partnerships.

In FY 2016, DASH provided funding to 18 state and 17 local education agencies to help districts and schools strengthen student health through exemplary sexual health education (ESHE) that emphasizes HIV and other STD prevention, increases access to key sexual health services (SHS), and establishes safe and supportive environments (SSE) for students and staff. DASH funded seven national, non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- In FY 2016, there were no DASH grantees in North Dakota funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2).

In addition, DASH funds local education agencies and NGOs to implement multiple program activities to meet the HIV/STD prevention needs of young men who have sex with men (YMSM) and to develop strategic partnerships and collaborations between schools and community-based, mental health, and social services organizations to accomplish this work.

- In FY 2016, there were no DASH grantees in North Dakota funded to deliver YMSM programming (1308 Strategy 4).

DASH also provides funding for state, territorial, and local education agencies and state health agencies to establish and strengthen systematic procedures to collect and report Youth Risk Behavior Surveillance (YRBS) and School Health Profiles data for policy and program improvements.

- In FY 2016, there was one DASH grantee in North Dakota funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The North Dakota Department of Public Instruction (\$65,000).

TEEN PREGNANCY PREVENTION PROGRAM

The Office of Adolescent Health (OAH), within the U.S. Department of Health and Human Services (HHS), administers the Teen Pregnancy Prevention Program (TPPP), which funds evidence-based (or innovative evidence-informed), medically accurate, and age-appropriate programs to reduce teen pregnancy. OAH provides program support, implementation evaluation, and technical assistance to grantees. In FY 2016, total funding for TPPP was \$101 million, with an additional \$6.8 million authorized for evaluation purposes, supporting a total of 84 states, cities, non-profit organizations, school districts, universities, community-based organizations, and tribal organizations that were in year two of five TPPP funding tiers' five-year cooperative agreements in 33 states and territories, including the District of Columbia and the Marshall Islands. OAH provides program support, implementation evaluation, and technical assistance to

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grantees and receives an additional \$6.8 million in funding for evaluation purposes. There are five TPPP funding tiers:

Tier 1A: Capacity building to support replication of evidence-based TPP programs.

Tier 1B: Replicating evidence-based TPP programs to scale in communities with the greatest need.

Tier 2A: Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy.

Tier 2B: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.

Tier 2C: Effectiveness of TPP programs designed specifically for young males.

- In FY 2016, there were no TPPP grantees in North Dakota.

PERSONAL RESPONSIBILITY EDUCATION PROGRAM

The Family and Youth Services Bureau (FYSB), within the Administration for Children and Families (ACF) division of HHS, administers the Personal Responsibility Education Program (PREP), which includes \$75 million for the state-grant program; local entities through the competitively awarded Personal Responsibility Education Innovative Strategies (PREIS) program; and the Tribal PREP, which funds tribes and tribal organizations. In addition, provisions within the PREP statute enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP state grants to apply for funding. Details on the state grants, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

State-grant PREP supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. In FY 2016, 43 states, the District of Columbia, the Federated States of Micronesia, Guam, Puerto Rico, and the Virgin Islands received PREP state-grant funds. The grant does not require states to provide matching funds. Funded programs must discuss abstinence and contraception and place substantial emphasis on both. Programs must also address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- In FY 2016, North Dakota declined PREP funds.

Personal Responsibility Education Innovative Strategies (PREIS)

PREIS supports research and demonstration programs to develop, replicate, refine, and test innovative models for preventing unintended teen pregnancy.

- In FY 2016, there were no PREIS grantees in North Dakota.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target young people ages 10–19 who are in or are aging out of foster care, young people experiencing homelessness, young people living with HIV/AIDS, young people who live in areas with high rates of adolescent births, and young people under age 21 who are pregnant and/or parenting. In FY 2016, eight tribes and tribal organizations from seven states received a total of \$3,436,621.

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- In FY 2016, there were no Tribal PREP grantees in North Dakota.

Competitive Personal Responsibility Education Program (CPREP)

CPREP grants support evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Only organizations and institutions in states and territories that did not apply for PREP state grants in either of the first two fiscal years after the call for PREP state-grant applications were eligible to submit competitive applications for CPREP grants. In FY 2016, 21 CPREP grants, totaling \$10.3 million, were awarded to 21 organizations in Florida, Indiana, North Dakota, Texas, and Virginia, as well as in American Samoa, Guam, and the Northern Mariana Islands.

- In FY 2016, the North Dakota State University received \$250,000 in CPREP funds.

NORTH DAKOTA STATE UNIVERSITY, \$250,000 (FY 2016)

North Dakota State University (NDSU) is a public research university located in Fargo, North Dakota. NDSU uses CPREP grant funds to implement their program, [*Reach One Teach One: North Dakota*](#). The program targets young people ages 14–19 years in the surrounding area. The goals of the program are to “prepare participants for healthy, productive adulthood and reduce the high societal costs of teen pregnancies.” The 12-week program follows a peer-to-peer model to discuss topics such as abstinence, reproduction, STDs, healthy relationships, and effective communication.¹⁸ The program will serve an estimated 196 young people in community-based, juvenile justice, and foster care settings. NDSU will implement [*Making Proud Choices!*](#) and [*Sexual Health and Adolescent Risk Prevention \(SHARP\)*](#) curricula to address adolescent development, healthy, and healthy life skills.¹⁹

TITLE V STATE ABSTINENCE EDUCATION GRANT PROGRAM

The Title V state abstinence education grant program for abstinence-only-until-marriage (AOUM) programming, or the Title V AOUM program, is administered by FYSB, within ACF of HHS, and was funded at \$75 million in FY 2016. The Title V AOUM program requires states to provide three state-raised dollars, or the equivalent in services, for every four federal dollars received. The state match may be provided in part or in full by local groups. All programs funded by Title V AOUM must exclusively promote abstinence from sexual activity and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must encourage abstinence as an expected outcome.

- In FY 2016, the North Dakota State Department of Health received \$90,145 in Title V AOUM funding.
- The department provides sub-grants to Northern Lights Youth Services, Inc. (NYLS) (\$69,011).
- In North Dakota, the match is provided through in-kind support from NYLS.

The North Dakota State Department of Public Health contracts with NYLS to administer the Title V AOUM grant. The abstinence education program targets middle school and high school students ages 12-18 in the following counties: Rolette, McLean, Burleigh, Cass, Trail, Wells, McHenry, Morton, Grand Forks, Walsh, Ramsey, Dickey, and LaMoure. NYLS uses the *Healthy Reality* curriculum, which was developed by NYLS and EPIC Assemblies tours and approved by North Dakota State University and the University of North Dakota.²⁰

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“SEXUAL RISK AVOIDANCE EDUCATION” GRANT PROGRAM

Administered by FYSB within ACF of HHS, the “sexual risk avoidance education” (SRAE), i.e., the AOUM grant program, provides competitive funding for programs that “teach young people to voluntarily refrain from non-marital sexual activity and prevent other youth risk behaviors.” These programs are also required by statute to “teach the benefits associated with self-regulation, success sequencing for poverty prevention, healthy relationships, goal setting, and resisting sexual coercion, dating violence, and other youth risk behaviors such as underage drinking or illicit drug use without normalizing teen sexual activity.” In FY 2016, \$10 million was appropriated for the SRAE grant program and \$8.98 million was awarded to 21 grantees in 12 states through a competitive application process.

- In FY 2016, there were no SRAE grantees in North Dakota.

POINTS OF CONTACT

DASH Contacts

Valerie Fischer
Director, Safe & Healthy Schools and Adult Education
North Dakota Department of Public Instruction
600 E. Boulevard Avenue, Dept. 201
Bismarck, ND 58505-0440
Phone: (701) 328-4138
Email: VFischer@nd.gov

Amy Scott
Assistant Director, Sponsored Programs Admin.
North Dakota State University
Phone: (701) 231-8045
Email: ndsu.research@ndsu.edu

Title V AOUM Program Contact

Cora Rabenberg
Phone: (701) 328-4535
Email: crabenberg@nd.gov

Adolescent Health Contact²¹

Becky Bailey, RN, BNSC
Director
Coordinated School Health and School Nursing
Division of Family Health
North Dakota Department of Health
600 East Boulevard Avenue, Department 301
Bismarck, ND 58505

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Phone: (701) 328-4526

¹ This refers to the federal government's fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2016 began on October 1, 2015, and ended on September 30, 2016.

² North Dakota Century Code Title 15.1-21-24 Health Curriculum – Content, www.legis.nd.gov/cencode/t15-1c21.pdf?20150906164416.

³ *North Dakota Health Content and Achievement Standards* (Bismarck, ND: North Dakota Department of Public Instruction, 2008), www.dpi.state.nd.us/standard/content/health/health2008.pdf, 16; Ibid., 26.

⁴ “High School YRBS,” Centers for Disease Control and Prevention, <https://nccd.cdc.gov/youthonline/App/Default.aspx>.

⁵ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

⁶ Ibid., Table 1.2.

⁷ “Teen Birth Rate Comparison, 2015 Among Girls Age 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/compare/1701>.

⁸ “Teen Births in North Dakota, Girls 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, [https://thenationalcampaign.org/data/state/North Dakota](https://thenationalcampaign.org/data/state/North%20Dakota).

⁹ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

¹⁰ Ibid., Table 1.2.

¹¹ Slide 17: “Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹² Slide 20: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Adolescents Aged 13–19 Years, 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹³ Slide 18: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁴ Slide 21: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Young Adults Aged 20–24 Years, 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁵ NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

¹⁶ Ibid.

¹⁷ Ibid.

¹⁸ “Backgrounder: Affordable Care Act Personal Responsibility Education Program (PREP) Grant,” North Dakota State University, www.ndsu.edu/fileadmin/nursing/NDSU_PREP_Backgrounder.pdf.

¹⁹ “Competitive Personal Responsibility Education Program Grantee Profiles,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, www.acf.hhs.gov/fysb/resource/cprep-profiles.

²⁰ Information provided by Cora Rabenberg, RN, BSN, Family Planning Program Director, Abstinence Education Grant Director, Women's Health Coordinator, North Dakota Department of Health, May 26, 2017.

²¹ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.