

In Fiscal Year 2016, the state of South Carolina received:

- Division of Adolescent and School Health funds totaling \$75,000
- Personal Responsibility Education Program funds totaling \$761,044
- Title V State Abstinence Education Program funds totaling \$1,311,148

In Fiscal Year 2016, local entities in South Carolina received:

• Teen Pregnancy Prevention Program funds totaling \$3,771,132

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

Public schools in South Carolina are required to provide sexually transmitted disease (STD) education beginning in sixth grade, but cannot provide information on STDs to students prior to that time.² Schools are not required to teach about human immunodeficiency virus (HIV) or acquired immunodeficiency syndrome (AIDS). State law specifies that age-appropriate reproductive health education may be offered for grades K–5. STDs and reproductive health are required to be included as a part of comprehensive health education in grades 6–8, and pregnancy prevention may be addressed.³ Students must also receive "at least 750 minutes of reproductive health education and pregnancy prevention education at least one time over the course of grades nine through twelve." Pregnancy prevention education must be provided in gender-divided classes.⁵

According to South Carolina Code Annotated §§ 59-32-10, "Reproductive health education' means instruction in human physiology, conception, prenatal care and development, childbirth, and postnatal care, but it does not include instruction concerning sexual practices outside marriage or practices unrelated to reproduction except within the context of the risk of disease. Abstinence and the risks associated with sexual activity outside of marriage must be strongly emphasized."

The law explains, "[c]ontraceptive information must be given in the context of future family planning." In addition, no school may distribute contraceptives. Abortion may only be discussed in the context of the complications that it may cause and "must not be mentioned as a method of birth control." Further, the law specifies that "the program of instruction provided for in this section may not include a discussion of alternate sexual lifestyles from heterosexual relationships including, but not limited to, homosexual relationships, except in the context of instruction concerning [STDs]."

Parents must be informed in advance of any sexuality-specific instruction and are allowed to remove their children from any part of the health education classes.¹⁰ This is referred to as an "opt-out" policy.

STATE STANDARDS

The state does not require or suggest a specific curriculum; however, the *South Carolina Academic Standards for Health Education* provide guidance for curricula development. The standards stress abstinence but allow students to be taught "the effective methods for the prevention of [sexually transmitted infections (STIs) [STDs], HIV, and unintended pregnancy." In order to develop its curriculum, each local school board must "appoint a [13]-member local advisory committee consisting of two parents, three clergy, two health professionals, two teachers, two students (one being the president of the student body of a high school), and two other persons not employed by the local school district." South Carolina also states that the Department of Education and local school boards must provide "staff development activities" for educators participating in the comprehensive health program. ¹²

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 <u>SIECUS'</u> 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 South Carolina. While data can be a powerful tool to demonstrate the sexuality 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.

SOUTH CAROLINA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA¹³

Reported ever having had sexual intercourse

- In 2015, 37% of female high school students and 43.6% of male high school students in South Carolina 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, 46.7% of black high school students and 35.8% of white high school students in South Carolina reported ever having had sexual intercourse, compared to 48.5% of black high school students and 39.9% of white high school students nationwide.

Reported having had sexual intercourse before age 13

• In 2015, 2.4% of female high school students and 10.5% of male high school students in South Carolina 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, 10.2% of black high school students and 3.3% of white high school students in South Carolina reported having had sexual intercourse before age 13, compared to 8.3% of black high school students and 2.5% of white high school students nationwide.

Reported being currently sexually active

- In 2015, 26.7% of female high school students and 28.2% of male high school students in South Carolina reported being currently sexually active, compared to 29.8% of female high school students and 30.3% of male high school students nationwide.
- In 2015, 27.7% of black high school students and 26.7% of white high school students in South Carolina reported being currently sexually active, compared to 33.1% of black high school students and 30.3% of white high school students nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 50.2% of female high school students and 32% of male high school students in South Carolina 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, 41.1% of white high school students in South Carolina reported not using a condom during their last sexual intercourse, compared to 43.2% of white high school students nationwide.

Reported not using any method to prevent pregnancy during last sexual intercourse

- In 2015, 14.2% of female high school students and 9.3% of male high school students in South Carolina reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.2% of female high school students and 12.2% of male high school students nationwide.
- In 2015, 9.4% of white high school students in South Carolina reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 10.4% of white high school students nationwide.

Reported never having been tested for HIV

- In 2015, 89.2% of female high school students and 90.1% of male high school students in South Carolina reported never having been tested for HIV, compared to 88.9% of female high school students and 90.7% of male high school students nationwide.
- In 2015, 87.2% of black high school students, 86.7% of Hispanic high school students, and 91.5% of white high school students in South Carolina reported never having been tested for HIV, compared to 83.4% of black high school students, 88.9% of Hispanic high school students, and 92% of white high school students nationwide.

Reported having been physically forced to have sexual intercourse

- In 2015, 8.4% of female high school students and 6% of male high school students in South Carolina 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, 6.4% of black high school students, 14.6% of Hispanic high school students, and 6.7% of white high school students in South Carolina reported having been physically forced to have sexual intercourse, compared to 7.3% of black high school students, 7% of Hispanic high school students, and 6% of white high school students nationwide.

Reported experiencing physical dating violence

- In 2015, 8.4% of female high school students and 7.7% of male high school students in South Carolina 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, 6.3% of black high school students and 8.6% of white high school students in South Carolina reported experiencing physical dating violence in the prior year, compared to 10.5% of black high school students and 9% of white high school students nationwide.

Reported experiencing sexual dating violence

- In 2015, 9.8% of female high school students and 5.3% of male high school students in South Carolina reported experiencing sexual dating violence in the prior year, compared to 15.6% of female high school students and 5.4% of male high school students nationwide.
- In 2015, 5% of black high school students and 8.3% of white high school students in South Carolina reported experiencing sexual dating violence in the prior year, compared to 10% of black high school students and 10.1% of white high school students nationwide.

Visit the Centers for Disease Control and Prevention's (CDC) <u>Youth Online</u> database for additional information on youth risk behaviors.

SOUTH CAROLINA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA Teen Pregnancy, Birth, and Abortion

- In 2011, South Carolina had the 11th highest teen pregnancy rate in the United States, with a rate of 59 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000. There were a total of 9,070 pregnancies among young women ages 15–19 reported in South Carolina in 2011. The state of 52 per 1,000 pregnancies among young women ages 15–19 reported in South Carolina in 2011.
- In 2015, South Carolina had the 16th highest teen birth rate in the United States, with a rate of 26.2 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000. There were a total of 4,297 live births to young women ages 15–19 reported in South Carolina in 2014, the most recent year of available data. To
- In 2011, South Carolina had the 20th highest teen abortion rate in the United States, with a rate of 11 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.¹⁸

There were a total of 1,670 abortions among young women ages 15–19 reported in South Carolina in 2011.¹⁹

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in South Carolina was 9.1 per 100,000, compared to the national rate of 5.8 per 100,000.²⁰
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in South Carolina was 1.8 per 100,000, compared to the national rate of 0.7 per 100,000.
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in South Carolina was 40.6 per 100,000, compared to the national rate of 31.1 per 100,000.²²
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in South Carolina was 7.2 per 100,000, compared to the national rate of 5.6 per 100,000.²³

STDs

- In 2015, South Carolina had the 7th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,465.9 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 7,661 cases of chlamydia among young people ages 15–19 reported in South Carolina.²⁴
- In 2015, South Carolina had the 6th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 551.1 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 1,588 cases of gonorrhea among young people ages 15–19 reported in South Carolina.²⁵
- In 2015, South Carolina had the 25th 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 3.5 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 11 cases of syphilis reported among young people ages 15–19 in South Carolina.²⁶

Visit the Office of Adolescent Health's (OAH) <u>South Carolina Adolescent Health Facts</u> 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 SOUTH CAROLINA

Grantee	Award	
Division of Adolescent and School Health (DASH)		
South Carolina Department of Education	\$75,000	

TOTAL	\$75,000
Teen Pregnancy Prevention Program (TPPP)	
TPPP Tier 1A	
South Carolina Campaign to Prevent Teen Pregnancy	\$716,000
TOTAL	\$716,000
TPPP Tier 1B	
The Children's Council	\$486,679
Mary Black Foundation	\$1,069,463
South Carolina Campaign to Prevent Teen Pregnancy	\$1,498,990
TOTAL	\$3,055,132
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
South Carolina Department of Health and Environmental Control (federal grant)	\$761,044
TOTAL	\$761,044
Title V Abstinence-Only-Until-Marriage Program (Title V AO	UM)
South Carolina Department of Health and Environmental Control (federal grant)	\$1,311,148
TOTAL	\$1,311,148
GRAND TOTAL	\$5,918,324

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 South Carolina 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 South Carolina 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 South Carolina funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The South Carolina Department of Education (\$75,000).

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

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

• In FY 2016, there was one TPPP Tier 1A grantee in South Carolina: The South Carolina Campaign to Prevent Teen Pregnancy (\$716,000).

SOUTH CAROLINA CAMPAIGN TO PREVENT TEEN PREGNANCY, \$716,000 (FY 2016)

The South Carolina Campaign to Prevent Teen Pregnancy (SC Campaign) was founded in 1994 to combat increasingly high rates of teen pregnancy in the state. The SC Campaign is a non-profit dedicated to the prevention of adolescent pregnancy in South Carolina through education, training, technical assistance, public awareness, advocacy, research, and evaluation. The organization believes "that the most effective health and sexuality education is age-appropriate and medically accurate, emphasizes abstinence, and provides information about contraception."²⁷ To this end, it supports and advocates for comprehensive sex education that contains information on both abstinence and contraception as a means to prevent teen pregnancy.²⁸

With its TPPP Tier 1A funding, the SC Campaign will offer capacity-building assistance to 16 organizations in South Carolina that currently provide programs and services to young people in the juvenile justice or foster care system, but that do not have the capacity to deliver evidence-based teen pregnancy prevention programs. The SC campaign will help each organization develop a HIV/STD and teen pregnancy prevention plan that includes implementation of evidence-based programming, referrals to teen-friendly healthcare services, and educational options for parents and caregivers. The SC Campaign aims to reach 1,000 young people per year and more than 3,380 young people during the five-year grant period.²⁹

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

• In FY 2016, there were three TPPP Tier 1B grantees in South Carolina: The Children's Council (\$486,679); Mary Black Foundation (\$1,069,463); and the South Carolina Campaign to Prevent Teen Pregnancy (\$1,498,990).

• These local organizations in South Carolina received a total of \$3,055,132 in TPPP Tier 1B funding.

THE CHILDREN'S COUNCIL, \$486,679 (FY 2016)

Founded in 1989, The Children's Council of Lancaster's mission is to support, endorse, and help establish any program or project that enhances the health, development and wellbeing of Lancaster County children ages 0-18, as well as their families.³⁰ With its TPPP Tier 1B funding, The Children's Council will partner with the Lancaster School District and University of South Carolina at Lancaster to implement programs for young people in Lancaster County. Programming that will be offered includes <u>Making a Difference!</u>, <u>Making Proud Choices!</u>, and <u>Seventeen Days</u>. The Children's Council aims to serve more than 2,100 young people per year.³¹

Mary Black Foundation, \$1,069,463 (FY 2016)

The Mary Black Foundation (MBF) is a private foundation established to improve the health of Spartanburg County, South Carolina. The foundation focuses on advancing early childhood development, healthy eating, and healthy living by providing funding and technical assistance to non-profit organizations in the area.³² With its TPPP Tier 1B funding, MBF will offer programming in Spartanburg County to vulnerable young people in school-, clinic-, and community-based settings. MBF uses the following curricula: *Love Notes*, *Seventeen Days*, *Be Proud! Be Responsible!*, *Making a Difference!*, *Making Proud Choices!*, *Sexual Health and Adolescent Risk Prevention (SHARP)*, *Teen Health Project*, and *Sisters Informing*, *Healing*, *and Educating (SiHLE)*. MBF aims to serve more than 3,320 young people per year.³³

SOUTH CAROLINA CAMPAIGN TO PREVENT TEEN PREGNANCY, \$1,498,990 (FY 2016)

As mentioned above, the SC Campaign is a non-profit dedicated to the prevention of adolescent pregnancy in South Carolina through education, training, technical assistance, public awareness, advocacy, research, and evaluation. With its TPPP Tier 1B funding, the SC Campaign will partner with local organizations to offer evidence-based programming to youth in Aiken, Anderson, and Orangeburg counties. The SC Campaign will contract with the Center for Health Services and Policy Research at the University of South Carolina to conduct evaluation activities. Curricula used will include: Draw the Line/Respect the Line, Making Proud Choices!, Reducing the Risk, Be Responsible!, and Seventeen Days. The SC Campaign aims to reach 6,000 young people per year and at least 24,000 young people over the five-year grant period. 34

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

• In FY 2016, there were no TPPP Tier 2A grantees in South Carolina.

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

• In FY 2016, there were no TPPP Tier 2B grantees in South Carolina.

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

• In FY 2016, there were no TPPP Tier 2C grantees in South Carolina.

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, the South Carolina Department of Health and Environmental Control received \$761,044 in federal PREP funds.³⁵
- The department provides sub-grants to two school districts, seven community-based organizations, and 19 health clinics.³⁶

The South Carolina Department of Health and Environmental Control (DHEC) implements the state's PREP grant in partnership with the SC Campaign to Prevent Teen Pregnancy and school-, clinic-, and community-based entities. Programming serves minority young people ages 10–19 in rural counties with high teen birth rates. Counties served include Aiken, Allendale, Bamberg, Barnwell, Beaufort, Berkley, Charleston, Chester, Colleton, Dorchester, Georgetown, Hampton, Jasper, Kershaw, Lancaster, Laurens, Lexington, Marlboro, Newberry, Orangeburg, Richland, and York. Grantees address healthy relationships, parent-child communication, and healthy life skills. Individual sub-grantees determine the settings in which they deliver programming and must utilize at least one of three evidence-based curricula approved by the DHEC: <u>Making Proud Choices!</u>, <u>Safer Choices</u>, and <u>Seventeen Days</u>.³⁷

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 South Carolina.

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.

• In FY 2016, there were no Tribal PREP grantees in South Carolina.

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, South Carolina received PREP state-grant funding; therefore, entities in South Carolina were not eligible for CPREP.

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 South Carolina Department of Health and Environmental Control received \$1,311,148 in federal Title V AOUM funding.³⁸
- At the time of publication, additional information on South Carolina's sub-grantees, approved curricula, and match was unavailable.

The purported goal of South Carolina's Department of Health and Environmental Control is to increase the proportion of adolescents postponing sexual activity and increase the number of adults and community areas that are supportive of adolescent delay of sexual activity. Specifically, the department aims to reduce the rate of out-of-wedlock births, rate of abortions, number of adolescents under the age of 20 who engage in sexual intercourse, rate of STDs, and rate of teen pregnancies. Sub-grantees will use the Heritage Keepers and Sex Can Wait curricula to serve an estimated 3,000 young people ages 10-19 who live in rural areas or areas with high teen birth rates. 40

"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 South Carolina.

POINTS OF CONTACT

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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.

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<sup>2</sup> S.C. Code Ann. §§ 59-32-30(A)(1)–(2), www.scstatehouse.gov/code/t59c032.php.
<sup>3</sup> S.C. Code Ann. § 59-32-30(A)(2).
<sup>4</sup> S.C. Code Ann. §§ 59-32-30(A)(3) and (6).
<sup>5</sup> S.C. Code Ann. § 59-32-30(F).
<sup>6</sup> S.C. Code Ann. § 59-32-10(1).
<sup>7</sup> S.C. Code Ann. § 59-32-10(4)(c).
<sup>8</sup> S.C. Code Ann. § 59-32-30(D); S.C. Code Ann. § 59-32-10(4)(c).
<sup>9</sup> S.C. Code Ann. § 59-32-30(A)(5).
<sup>10</sup> S.C. Code Ann. § 59-32-50.
<sup>11</sup> S.C. Code Ann. § 59-32-30(B), www.scstatehouse.gov/code/t59c032.php.
<sup>12</sup> S.C. Code Ann. § 59-32-40.
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