

In Fiscal Year 2016,<sup>1</sup> the state of North Carolina received:

- Division of Adolescent and School Health funds totaling \$415,000
- Teen Pregnancy Prevention Program funds totaling \$999,999
- Personal Responsibility Education Program funds totaling \$1,613,898
- Title V State Abstinence Education Program funds totaling \$2,544,986

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

• Teen Pregnancy Prevention Program funds totaling \$3,666,926

# SEXUALITY EDUCATION LAW AND POLICY

# STATE LAW

North Carolina General Statutes § 115C-81 require schools to teach a comprehensive health education program, which includes instruction on the prevention of pregnancy and sexually transmitted diseases (STDs), including human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS). Schools must stress the importance of parental involvement and teach refusal skills and strategies to handle peer pressure.<sup>2</sup> Comprehensive health education must include "reproductive health and safety education" beginning in seventh grade. Such instruction must teach "that abstinence from sexual activity outside of marriage is the expected standard for all school-age children" and "that a mutually faithful, monogamous, heterosexual relationship in the context of marriage is the best lifelong means of avoiding sexually transmitted diseases, including HIV/AIDS," among other stipulations.<sup>3</sup> With respect to contraception and family planning, the law requires instruction to teach:

- a) "... how [STDs] are and are not transmitted, the effectiveness and safety of all federal Food and Drug Administration (FDA)-approved methods of reducing the risk of contracting [STDs], and information on local resources for testing and medical care for [STDs] ...; and
- b) The effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy."<sup>5</sup>

The information included in reproductive health and safety education must be age-appropriate, objective, and based upon scientific research that is peer reviewed and accepted by professionals in the field of sexual health education. Students may receive information about where to obtain contraceptives and abortion referral services only in accordance with a local board's policy regarding parental consent. Contraceptives, including condoms and other devices, shall not be made available or distributed on school property.

Instruction must also teach "awareness of sexual assault, sexual abuse, and risk reduction" and focus on healthy relationships.

The State Board of Education shall make available a list of reviewed materials, any approved textbooks and other approved materials for discussion regarding pregnancy and STDs, including HIV prevention, to parents and legal guardians at least 60 days before such instruction is provided in the classroom.<sup>8</sup>

North Carolina law also requires local school boards to "adopt policies to provide opportunities either for parents and legal guardians to consent or for parents and legal guardians to withhold their consent to the students' participation in any or all of these programs." These are referred to as "opt-in" and "opt-out" policies, respectively.

#### STATE STANDARDS

The North Carolina Department of Public Instruction provides <u>Healthful Living: Standard Course of Study and Grade-Level Competencies</u>, which offers model policies and content outlines. <sup>10</sup> Essential standards included in this guideline include the skill to "evaluate abstinence from sexual intercourse as a positive choice for young people," and to "create strategies that develop and maintain reproductive and sexual health," which includes "illustrat[ing] skills related to safe and effective use of methods to prevent STDs, as well as access resources for testing and treatment."

# STATE LEGISLATIVE 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 North 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.

# NORTH CAROLINA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA<sup>11</sup>

Reported ever having had sexual intercourse

• In 2015, 41.4% of female high school students and 45.8% of male high school students in North 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, 52.8% of lesbian, gay, or bisexual (LGB) high school students, 28% of high school students who were unsure of their sexual orientation, and 42.8% of heterosexual high school students in North Carolina 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, 5.8% of Asian high school students, 54.9% of black high school students, 36.7% of Hispanic high school students, 40.4% of white high school students, and 45.4% of high school students who identified as multiple races in North Carolina reported ever having had sexual intercourse, compared to 19.3% of Asian high school students, 48.5% of black high school students, 42.5% of Hispanic high school students, 39.9% of white high school students, and 49.2% of high school students who identified as multiple races nationwide.

# Reported having had sexual intercourse before age 13

- In 2015, 2.5% of female high school students and 7.8% of male high school students in North 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, 7.2% of LGB high school students, 11.2% of high school students who were unsure of their sexual orientation, and 4.3% of heterosexual high school students in North Carolina 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, 0.1% of Asian high school students, 8.5% of black high school students, 5.4% of Hispanic high school students, 3.3% of white high school students, and 2.9% of high school students who identified as multiple races in North Carolina reported having had sexual intercourse before age 13, compared to 0.7% of Asian high school students, 8.3% of black high school students, 5% of Hispanic high school students, 2.5% of white high school students, and 5.8% of high school students who identified as multiple races nationwide.

# Reported being currently sexually active

- In 2015, 32.4% of female high school students and 33% of male high school students in North 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, 38.2% of LGB high school students, 21.6% of high school students who were unsure of their sexual orientation, and 32.4% of heterosexual high school students in North Carolina 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, 5.9% of Asian high school students, 39.9% of black high school students, 26.6% of Hispanic high school students, 31.2% of white high school students, and 34.7% of high school students who identified as multiple races in North Carolina reported being currently sexually active, compared to 12.2% of Asian high school students, 33.1% of black high school students, 30.3% of Hispanic high school students, 30.3% of white high school students, and 35.7% of high school students who identified as multiple races nationwide.

# Reported not using a condom during last sexual intercourse

- In 2015, 44.5% of female high school students and 34.7% of male high school students in North 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, 58% of LGB high school students, 63.4% of high school students who were unsure of their sexual orientation, and 37.5% of heterosexual high school students in North Carolina reported not using a condom during their last sexual intercourse, compared to 52.5% of LGB high school students, 47.8% of high school students who were unsure of their sexual orientation, and 42.2% of heterosexual high school students nationwide.
- In 2015, 29.5% of black high school students, 50.1% of Hispanic high school students, 42.5% of white high school students, and 50% of high school students who identified as multiple races in North Carolina reported not using a condom during their last sexual intercourse, compared to 36.3% of black high school students, 44.4% of Hispanic high school students, 43.2% of white high school students, and 48.8% of high school students who identified as multiple races nationwide.

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

- In 2015, 15.4% of female high school students and 10.8% of male high school students in North 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, 34.1% of LGB high school students, 34.7% of high school students who were unsure of their sexual orientation, and 10.7% of heterosexual high school students in North Carolina reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 26.4% of LGB high school students, 19.4% of high school students who were unsure of their sexual orientation, and 12.4% of heterosexual high school students nationwide.
- In 2015, 12.4% of black high school students, 20% of Hispanic high school students, 10.4% of white high school students, and 20.2% of high school students who identified as multiple races in North Carolina reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.9% of black high school students, 20% of Hispanic high school

students, 10.4% of white high school students, and 16.7% of high school students who identified as multiple races nationwide.

# Reported never having been tested for HIV

- In 2015, 89% of female high school students and 89.7% of male high school students in North 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, 78.1% of LGB high school students, 90.7% of high school students who were unsure of their sexual orientation, and 90.4% of heterosexual high school students in North Carolina reported never having been tested for HIV, compared to 81.8% of LGB high school students, 87.2% of high school students who were unsure of their sexual orientation, and 90.7% of heterosexual high school students nationwide.
- In 2015, 93.9% of Asian high school students, 82.5% of black high school students, 92.2% of Hispanic high school students, 91.8% of white high school students, and 88% of high school students who identified as multiple races in North Carolina reported never having been tested for HIV, compared to 90.4% of Asian high school students, 83.4% of black high school students, 88.9% of Hispanic high school students, 92% of white high school students, and 86.6% of high school students who identified as multiple races nationwide.

# Reported having been physically forced to have sexual intercourse

- In 2015, 8.8% of female high school students and 4.4% of male high school students in North 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, 14.8% of LGB high school students, 10.3% of high school students who were unsure of their sexual orientation, and 5.6% of heterosexual high school students in North Carolina 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, 1.4% of Asian high school students, 5.1% of black high school students, 11.5% of Hispanic high school students, 6% of white high school students, and 7.7% of high school students who identified as multiple races in North Carolina reported having been physically forced to have sexual intercourse, compared to 4.2% of Asian high school students, 7.3% of black high school students, 7% of Hispanic high school students, 6% of white high school students, and 12.1% of high school students who identified as multiple races nationwide.

# Reported experiencing physical dating violence

- In 2015, 9.2% of female high school students and 7.3% of male high school students in North 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, 17.8% of LGB high school students, 11.3% of high school students who were unsure of their sexual orientation, and 7.1% of heterosexual high school students in North Carolina 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, 7.2% of black high school students, 12.3% of Hispanic high school students, 7.8% of white high school students, and 8% of high school students who identified as multiple races in North Carolina reported experiencing physical dating violence in the prior year, compared to 10.5% of black high school students, 9.7% of Hispanic high school students, 9% of white high school students, and 16% of high school students who identified as multiple races nationwide.

# Reported experiencing sexual dating violence

- In 2015, 11.1% of female high school students and 4.4% of male high school students in North 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, 13.7% of LGB high school students, 11.7% of high school students who were unsure of their sexual orientation, and 6.9% of heterosexual high school students in North Carolina reported experiencing sexual dating violence in the prior year, compared to 22.7% of LGB high school students, 23.8% of high school students who were unsure of their sexual orientation, and 9.1% of heterosexual high school students nationwide.
- In 2015, 5.6% of black high school students, 12.6% of Hispanic high school students, 7.5% of white high school students, and 8.3% of high school students who identified as multiple races in North Carolina reported experiencing sexual dating violence in the prior year, compared to 10% of black high school students, 10.6% of Hispanic high school students, 10.1% of white high school students, and 14.2% of high school students who identified as multiple races nationwide.

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

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

• In 2011, North Carolina had the 22nd highest teen pregnancy rate in the United States, with a rate of 53 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per

1,000.<sup>12</sup> There were a total of 16,800 pregnancies among young women ages 15–19 reported in North Carolina in 2011.<sup>13</sup>

- In 2015, North Carolina had the 22nd highest teen birth rate in the United States, with a rate of 23.6 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000. <sup>14</sup> There were a total of 8,280 live births to young women ages 15–19 reported in North Carolina in 2014, the most recent year of available data. <sup>15</sup>
- In 2011, North Carolina had the 24th highest teen abortion rate in the United States, with a rate of 10 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000. <sup>16</sup> There were a total of 3,200 abortions among young women ages 15–19 reported in North Carolina in 2011. <sup>17</sup>

# HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in North Carolina was 7.1 per 100,000, compared to the national rate of 5.8 per 100,000. <sup>18</sup>
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in North Carolina was 0.5 per 100,000, compared to the national rate of 0.7 per 100,000. <sup>19</sup>
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in North Carolina was 39.3 per 100,000, compared to the national rate of 31.1 per 100,000.<sup>20</sup>
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in North Carolina was 6.5 per 100,000, compared to the national rate of 5.6 per 100,000.<sup>21</sup>

# **STDs**

- In 2015, North Carolina had the 4th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,682.6 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 17,516 cases of chlamydia among young people ages 15–19 reported in North Carolina.<sup>22</sup>
- In 2015, North Carolina had the 4th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 581.4 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 3,796 cases of gonorrhea among young people ages 15–19 reported in North Carolina.<sup>23</sup>
- In 2015, North Carolina had the 3rd 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 10.4 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 68 cases of syphilis reported among young people ages 15–19 in North Carolina.<sup>24</sup>

Visit the Office of Adolescent Health's (OAH) North Carolina 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 CAROLINA

Grantee	Award
Division of Adolescent and School Health (DASH)	
North Carolina Department of Public Instruction	\$415,000
TOTAL	\$415,000
Teen Pregnancy Prevention Program (TPPP)	
TPPP Tier 1A	
SHIFT NC	\$736,766
TOTAL	\$736,766
TPPP Tier 1B	
North Carolina Department of Health and Human Services	\$999,999
SHIFT NC	\$1,749,000
TOTAL	\$2,748,999
TPPP Tier 2B	
Children's Home Society of North Carolina, Inc.	\$586,000
Public Health Authority of Cabarrus County	\$595,160
TOTAL	\$1,181,160
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
North Carolina Department of Health and Human Services (federal grant)	\$1,613,898
TOTAL	\$1,613,898
Title V Abstinence-Only-Until-Marriage Program (Title V AOU	<u>M</u> )
North Carolina Department of Public Instruction (federal grant)	\$2,544,986
TOTAL	\$2,544,986
GRAND TOTAL	\$9,240,809

#### 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 was one DASH grantee in North Carolina funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2): The North Carolina Department of Public Instruction (\$320,000).

NORTH CAROLINA DEPARTMENT OF PUBLIC INSTRUCTION, \$320,000 (FY 2016)

With its 1308 Strategy 2 funds, the North Carolina Department of Public Instruction disseminates state laws and the North Carolina Essential Standards for Health document to support the implementation of sexual health education in schools. The department also trains teachers to increase their competencies and skills to teach sexual health education. Additionally, to increase access to youth-friendly sexual health services, the department developed a local referral system and state-specific website for sexual health services. To increase safe and supportive school environments for all students, the department offers service-learning opportunities for students and distributes DASH's Parent Engagement Strategies.<sup>25</sup>

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 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 North Carolina funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The North Carolina Department of Public Instruction (\$95,000).

# 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 North Carolina: SHIFT NC (\$736,766).

# SHIFT NC, \$736,766 (FY 2016)

Formerly known as the Adolescent Pregnancy Prevention Campaign of North Carolina, Sexual Health Initiatives for Teens (SHIFT NC) is a statewide, non-profit organization dedicated to using "successful, evidence-based methods to make a positive change for teen pregnancy prevention, HIV and [sexually transmitted infections] STIs, healthy development, sexuality, and relationships." With its TPPP Tier 1A funding, SHIFT NC plans to implement EVERY TEEN COUNTS: Working with Out-of-Home and Justice-Involve Youth Project. The goal of this project is to build the capacity of foster care and juvenile detention systems to serve young people at high risk of experiencing a teen pregnancy. The project targets the following nine counties of rural northeastern North Carolina: Bertie, Franklin, Granville, Halifax, Nash, Northampton, Vance, Warren, and Wilson. SHIFT NC will work with 8-10 foster care organizations to provide Making Proud Choices: An Adaptation for Out of Home Youth (MPC+) and with two juvenile detention centers to provide Sexual Health and Adolescent Risk Prevention (SHARP). SHIFT NC aims to reach 400 young people per year and between 1,200-1,400 young people over the course of the grant period.<sup>27</sup>

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

- In FY 2016, there were two TPPP Tier 1B grantees in North Carolina: North Carolina Department of Health and Human Services (\$999,999) and SHIFT NC (\$1,749,000).
- These state and local organizations in North Carolina received a total of \$2,748,999 in TPPP Tier 1B funding.

NORTH CAROLINA DEPARTMENT OF HEALTH AND HUMAN SERVICES, \$999,999 (FY 2016)
The North Carolina Department of Health and Human Services will use the TPPP Tier 1B funds to implement evidence-based programming to middle and high school students in Edgecombe, Richmond, and Graham Counties. The goal of the project is to lower adolescent birth rates in the three counties by 10 percent. The department will provide <u>Draw the Line/Respect the Line</u> in middle schools, <u>Reducing the Risk</u> in high schools, and <u>Making Proud Choices!</u> in after-school settings. The department aims to serve 2,225 young people per year and more than 11,000 young people total during the five-year grant period.<sup>28</sup>

# SHIFT NC, \$1,749,000 (FY 2016)

With its TPPP Tier 1B funding, SHIFT NC will provide evidence-based programming, other evidence-based practice, and health care linking/referral strategies to young people ages 11-19 in Cumberland and Onslow Counties. North Carolina Youth Connected, a collaborative partnership between the two counties and SHIFT NC, will work with county school districts, systems serving young people in foster care, young people involved with the juvenile justice system, community-based organizations, universities and colleges, health care providers, and other community entities to implement evidence-based programming. Curricula offered will include *Project AIM*, *Seventeen Days*, *Making Proud Choices: An Adaptation for Out-of-Home Youth (MPC+)*, *Promoting Health Among Teens! Abstinence-Only (PHAT-AO)*, *All4You!*, *Sexual Health and Adolescent Risk Prevention (SHARP)*, *Get Real*, and *Teen Health Project*. SHIFT NC aims to serve approximately 10,000 young people per year and a total of 53,000 young people by the end of the five-year grant period.<sup>29</sup>

<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 North Carolina.

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

- In FY 2016, there were two TPPP Tier 2B grantees in North Carolina: Children's Home Society of North Carolina, Inc., (\$586,000) and Public Health Authority of Cabarrus County (\$595,160).
- These state and local organizations in North Carolina received a total of \$1,181,160 in TPPP Tier 2B funding.

# CHILDREN'S HOME SOCIETY OF NORTH CAROLINA, INC., \$586,000 (FY 2016)

Children's Home Society of North Carolina, Inc., (CHS) is dedicated to promoting "the right of every child to a permanent, safe, and loving family" and has placed more than 15,000 children in adoptive homes. Additionally, CHS promotes healthy family environments by providing parent and teen education programs and training. The organization serves more than 20,000 clients each year and is based in 10 cities across North Carolina. With its TPPP Tier 2B funding, CHS will implement and evaluate Wise Guys, an intervention method that focuses on the following topics: reproductive anatomy and pregnancy, values, fatherhood, goal-setting, decision-making, communication, healthy relationships, intimate partner violence, HIV and other STDs, contraception, and abstinence. The program involves games and quizzes, role-plays, small group projects, guided discussion, brainstorming, and ranking exercises. A total of 1,500 young men grades 9–11 in Iredell-Statesville Schools will be recruited for the project and will be split evenly between intervention and control groups. Evaluation will be based on measurements taken before the intervention, three months post-intervention, and nine months post-intervention.

# PUBLIC HEALTH AUTHORITY OF CABARRUS COUNTY, \$596,160 (FY 2016)

Formerly known as the Cabarrus County Health Department, Cabarrus Health Alliance is the public health authority of Cabarrus County. With its TPPP Tier 2B funding, Cabarrus Health Alliance will implement and evaluate an intervention method, <u>Taking Responsible Actions in Life (TRAIL)</u>, in high schools in Cabarrus County. The intervention involves three tiers of services:

• Universal strategies to reach the entire student body through staff professional development, a Geographic Information Systems-based Health Care Access map, and a marketing campaign;

- Targeting strategies to reach all ninth grade students through a leadership development program and service learning opportunities; and
- Intensive strategies to target students with particular risk factors, such as low school attachment and low self-esteem.

The program also includes an after-school physical activity component, mentorship, and summer advantage opportunities. Evaluation of the program will measure the impact of TRAIL on sexual initiation, use of birth control, frequency of sex, parental communication, social norms, and school climate. Cabarrus Health Alliance aims to reach 1,000 young people per year over the course of the grant period.<sup>33</sup>

<u>Tier 2C</u>: Effectiveness of TPP programs designed specifically for young males.

• In FY 2016, there were no TPPP Tier 2C grantees in North 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 North Carolina Department of Health and Human Services received \$1,613,898 in federal PREP funds.<sup>34</sup>
- The agency provides sub-grants to seven local public and private entities. The sub-grantee information is listed below.<sup>35</sup>

Sub-grantee	Serving	Amount
	Brunswick, Burke, Cabarrus, Chowan,	
Appalachian State University	Cumberland, Davidson, Duplin,	\$344,017
	Hoke, Lenoir, Montgomery, Orange,	

	Scotland, Pamlico, Wilson, and	
	Wayne School Districts	
	Craven County Schools and Craven	
Duke University	County Church and community-	\$132,500
	based sites	
Coalition for Families in Lee County	Lee County Schools	\$132,500
Gaston County Department of Health and	C + C + C 1 1	\$132,500
Human Services	Gaston County Schools	
Infinite Possibilities, Inc.	Vance County Schools	\$132,500
Martin-Tyrrell-Washington Health District	Martin County Schools	\$132,500
	CIS Academy, Boys and Girls Club,	\$132,500
Robeson County Health Department	and community sites in Robeson	
	County	

The North Carolina Department of Health and Human Services, Division of Public Health's Women's Health Branch, implements the state's PREP grant. The agency collaborates with seven sub-grantees to provide school- and community-based programming to young people. Programming targets students grades 6-12 from counties that are in the top 50% of teen birth rates. Part of the PREP funding has been allocated to Appalachian State University to provide training and technical assistance to middle and high school health teachers and community-based organizations on the implementation of <u>Making Proud Choices!</u>. Additional sub-grants are allocated to local organizations to implement <u>Teen Outreach Program (TOP)</u> in both school- and community-based settings. Sub-grantees address the following adulthood preparation subjects: healthy relationships, parent-child communication, adolescent development, and healthy life skills.<sup>36</sup>

# 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 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 North 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, North Carolina received PREP state-grant funding; therefore, entities in North 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 North Carolina Department of Public Instruction received \$2,544,986 in federal Title V AOUM funding.<sup>37</sup>
- The North Carolina Department of Public Instruction provides 32 local education agencies, one university, and one non-profit entity. Known sub-grantee information is listed below.<sup>38</sup>
- In North Carolina, the match is provided through in-kind contributions.

The North Carolina Department of Public Instruction provides Title V AOUM funding to 34 sub-grantees in an effort to support programs that address four of the state's eight coordinated school health components, including: health education, school health services, behavioral mental health, and family and community involvement. Programming targets students ages 10-14 in grades 5-6 in school-based settings.

Priority is given to school districts located in counties with high teen birth and pregnancy rates, high rates of children in the foster care system, high eligibility for free and reduced lunch in public schools, and academic risk factors. The Department of Public Instruction distributes a bulk of the funding to 32 local education agencies. The 32 local education agencies, which receive \$50,000 each, include: Allegheny, Anson, Ashe, Bertie, Bladen, Caldwell, Cumberland, Duplin, Edenton/Chowan, Edgecombe, Granville, Green, Halifax, Hertford, Hoke, Lee, Lenoir, Martin, Montgomery, Northampton, Randolph, Asheboro City Schools – Randolph County, Robeson, Rockingham, Sampson, Scotland, Swain, Vance, Warren, Washington, Wayne, and Wilson County schools. Additionally, The Northwest Region Education Service Alliance and the Western Region Education Service Alliance each receive \$65,000. Two contracts are currently in process for Alice Aycock Poe Center for Health Education (\$54,000) and Pfeiffer University (\$72,000). The following curricula have been approved for use: *Making a Difference!*; *Puberty: The Wonder Years*; *Smart Girls Life Skills Training*; *Why Try*; *Boy to Men, Girl to Women*; and *Successfully Teaching Middle School Health* (NC developed). North Carolina is a local control state; therefore, decisions about curricula use are made at the district level. However, sub-grantees are encouraged to use an evidence-based program and are required to use a medically accurate curriculum.<sup>39</sup>

#### "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 Carolina.

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www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter 115C/GS 115C-81.html.

- <sup>3</sup> N.C. Gen. Stat. § 115C-81(e1)(4)(d); N.C. Gen. Stat. § 115C-81(e1)(4)(e).
- <sup>4</sup> N.C. Gen. Stat. § 115C-81(e1)(4a)(a).
- <sup>5</sup> N.C. Gen. Stat. § 115C-81(e1)(4a)(b).
- <sup>6</sup> N.C. Gen. Stat. § 115C-81(e1)(4); N.C. Gen. Stat. § 115C-81(e1)(4a).
- <sup>7</sup> N.C. Gen. Stat. § 115C-81(e1)(9).
- <sup>8</sup> N.C. Gen. Stat. § 115C-81(e1)(5).
- <sup>9</sup> N.C. Gen. Stat. § 115C-81(e1)(7).

<sup>&</sup>lt;sup>1</sup> 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.

<sup>&</sup>lt;sup>2</sup> N.C. Gen. Stat. § 115C-81(e1)(4),

<sup>&</sup>lt;sup>10</sup> Healthful Living: Essential Standards (Raleigh, NC: North Carolina Department of Public Instruction, 2006), www.dpi.state.nc.us/curriculum/healthfulliving/scos.

<sup>&</sup>lt;sup>11</sup> "High School YRBS," Centers for Disease Control and Prevention, <a href="https://nccd.cdc.gov/youthonline/App/Default.aspx">https://nccd.cdc.gov/youthonline/App/Default.aspx</a>.

<sup>&</sup>lt;sup>12</sup> 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), <a href="https://www.guttmacher.org/sites/default/files/report\_pdf/us-teen-pregnancy-state-trends-2011\_4.pdf">www.guttmacher.org/sites/default/files/report\_pdf/us-teen-pregnancy-state-trends-2011\_4.pdf</a>, Table 1.1.

<sup>&</sup>lt;sup>13</sup> Ibid., Table 1.2.

- <sup>14</sup> "Teen Birth Rate Comparison, 2015 Among Girls Age 15-19," The National Campaign to Prevent Teen and Unplanned Pregnancy, <a href="https://thenationalcampaign.org/data/compare/1701">https://thenationalcampaign.org/data/compare/1701</a>.
- <sup>15</sup> "Teen Births in North Carolina, Girls 15-19," The National Campaign to Prevent Teen and Unplanned Pregnancy, <a href="https://thenationalcampaign.org/data/state/North Carolina">https://thenationalcampaign.org/data/state/North Carolina</a>.
- <sup>16</sup> 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), <a href="https://www.guttmacher.org/sites/default/files/report\_pdf/us-teen-pregnancy-state-trends-2011\_4.pdf">www.guttmacher.org/sites/default/files/report\_pdf/us-teen-pregnancy-state-trends-2011\_4.pdf</a>, Table 1.1.
- <sup>17</sup> Ibid., Table 1.2.
- <sup>18</sup> 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), <a href="https://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf">www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf</a>.
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- <sup>21</sup> 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), <a href="https://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf">https://www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf</a>.
- <sup>22</sup> NCHHSTP Atlas, "STD Surveillance Data" (Atlanta, GA: Centers for Disease Control and Prevention), <a href="http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html">http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html</a>.
- <sup>23</sup> Ibid.
- <sup>24</sup> Ibid.
- <sup>25</sup> Centers for Disease Control and Prevention, Adolescent and School Health, Funded State Agencies, Atlanta, GA, <a href="https://www.cdc.gov/healthyvouth/partners/funded">www.cdc.gov/healthyvouth/partners/funded</a> states.htm#nc.
- <sup>26</sup> "About," Sexual Health Initiatives for Teens, <u>www.shiftnc.org/teens</u>.
- <sup>27</sup> "SHIFT NC," Grantees (NC) TPP Tier 1A, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grants/grantees/tpp/1a/shift-nc.html.
- <sup>28</sup> "North Carolina Department of Health and Human Services," Grantees (NC) TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, <a href="https://www.hhs.gov/ash/oah/grants/grantees/tpp/1b/north-carolina-department-of-health-and-human-services.html">https://www.hhs.gov/ash/oah/grants/grantees/tpp/1b/north-carolina-department-of-health-and-human-services.html</a>.
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- <sup>30</sup> "About," Children's Home Society of North Carolina, Inc., www.chsnc.org/about.
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- <sup>34</sup> "2016 State Personal Responsibility Education Program (PREP) Awards," Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, <a href="https://www.acf.hhs.gov/fysb/resource/2016-state-prep-awards">www.acf.hhs.gov/fysb/resource/2016-state-prep-awards</a>.
- <sup>35</sup> Information provided by Tilneil Gary, MA, PREP Consultant, Division of Public Health--Women's Health Branch, North Carolina Department of Health and Human Services, May 9, 2017.

  <sup>36</sup> Ibid.
- <sup>37</sup> "2016 Title V State Abstinence Education Program Grant Awards," Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, <a href="https://www.acf.hhs.gov/fvsb/resource/2016-title-v-grant-awards">www.acf.hhs.gov/fvsb/resource/2016-title-v-grant-awards</a>.

<sup>38</sup> Information provided by Nakisha Floyd, Abstinence Education Consultant, North Carolina Department of Public Instruction, May 2, 2017.
<sup>39</sup> Ibid.