



SIECUS

State Profile

NORTH CAROLINA

In Fiscal Year 2013,¹ the state of North Carolina received:

- **Division of Adolescent and School Health funds totaling \$288,954**
- **Personal Responsibility Education Program funds totaling \$1,515,911**
- **Title V State Abstinence Education Program funds totaling \$1,621,069**

In Fiscal Year 2013, local entities in North Carolina received:

- **Teen Pregnancy Prevention Initiative funds totaling \$2,768,066**
 - **Pregnancy Assistance Fund dollars totaling \$1,500,000**
- **Competitive Abstinence Education Grant Program funds totaling \$1,136,718**

SEXUALITY EDUCATION LAW AND POLICY

North Carolina schools are required to teach a comprehensive health education program, which includes instruction on the prevention of unintended pregnancy and sexually transmitted diseases (STDs), including HIV/AIDS. Schools must stress the importance of parental involvement and teach refusal skills and strategies to handle peer pressure.² Comprehensive health education must include “reproductive health and safety education” beginning in grade 7. 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.³ With respect to contraception and family planning, the law requires instruction to teach:

- “how sexually transmitted diseases 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 sexually transmitted diseases, and information on local resources for testing and medical care for sexually transmitted diseases...;⁴ and
- “the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy.”⁵

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.⁶ 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.⁷ 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 STD/HIV prevention to parents and legal guardians at least 60 days before such instruction is provided in the classroom.⁸

The North Carolina Department of Public Instruction provides several different resources for schools, including *Communicable Diseases—Students*, *Components of a Strong School HIV Policy*, and *Healthful Living: Standard Course of Study and Grade-Level Competencies*. These documents offer model policies and content outlines. However, school districts make the ultimate decision about classroom education. Each school district must also establish a school health advisory council.⁹

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.”¹⁰ These are referred to as “opt-in” and “opt-out” policies, respectively.

See North Carolina General Statutes § 115C-81, *Components of a Strong School HIV Policy*, *Healthful Living: Standard Course of Study and Grade-Level Competencies*, and *Communicable Diseases—Students*.

2013 STATE LEGISLATIVE ACTIVITY

Bill to Require Parental Consent for Sexual Health Services

Introduced in April 2013, the North Carolina Parental Consent Bill, HB 694, requires unaccompanied minors to obtain parental or judicial consent for sexual health services, including STD testing and treatment, contraception, and pregnancy care. If enacted, minors without parents or guardians would have to stand before a judge in order to gain access to those health services. House Bill 694 currently remains in the Committee on Judiciary, carrying over into the next legislative session.

Bill to Require Instruction on Causes of Preterm Birth

Introduced in February, SB 132 became state law 2013-307 on July 18, 2013. The new law amends the school health education program requirements to include instruction on the following preventable causes of preterm birth in subsequent pregnancies: alcohol consumption, illicit drug use, inadequate prenatal care, induced abortion, and smoking.

YOUTH SEXUAL HEALTH DATA

SIECUS has compiled the following data to provide an overview of adolescent sexual health in North Carolina. The data collected represents the most current information available.

North Carolina Youth Risk Behavior Survey (YRBS) Data¹¹

- In 2013, 45.4% of female high school students and 49.2% of male high school students in North Carolina reported ever having had sexual intercourse, compared to 46% of female high school students and 47.5% of male high school students nationwide.
- In 2013, 3.9% of female high school students and 9.1% of male high school students in North Carolina reported having had sexual intercourse before age 13, compared to 3.1% of female high school students and 8.3% of male high school students nationwide.
- In 2013, 33.2% of female high school students and 31% of male high school students in North Carolina reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 35.2% of female high school students and 32.7% of male high school students nationwide.

- In 2013, 12.2% of female high school students and 6.2% of male high school students in North Carolina who dated or went out with someone during the 12 months before the survey reported experiencing physical dating violence one or more times during that time period (defined as being hit, slammed into something, or injured with an object or weapon on purpose by someone they were dating or going out with), compared to 13% of female high school students and 7.4% of male high school students nationwide.

Visit the Centers for Disease Control and Prevention's [Youth Online database](#) for additional information on youth risk behaviors in North Carolina and Charlotte-Mecklenburg County.

North Carolina Teen Pregnancy, HIV/AIDS, and Other STD Data

Teen Pregnancy, Birth, and Abortion

- In 2010, North Carolina's teen pregnancy rate ranked 20th in the United States, with a rate of 59 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.¹² There were a total of 19,000 pregnancies among young women ages 15–19 in North Carolina in 2010.¹³
- In 2012, North Carolina's teen birth rate ranked 22nd in the United States, with a rate of 31.8 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.¹⁴ In 2012, there were a total of 10,077 live births to young women ages 15–19 reported in North Carolina.¹⁵
- In 2010, North Carolina's teen abortion rate ranked 22nd in the United States, with a rate of 12 abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹⁶ There were a total of 3,840 abortions among young women ages 15–19 reported in North Carolina in 2010.¹⁷

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in North Carolina was 10.9 per 100,000, compared to the national rate of 7.6 per 100,000.¹⁸
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in North Carolina was 1.8 per 100,000, compared to the national rate of 1.9 per 100,000.¹⁹
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in North Carolina was 41.2 per 100,000, compared to the national rate of 36.3 per 100,000.²⁰
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in North Carolina was 11 per 100,000, compared to the national rate of 10.9 per 100,000.²¹

Sexually Transmitted Diseases

- In 2012, North Carolina ranked 10th in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,487.5 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 16,259 cases of chlamydia among young people ages 15–19 reported in North Carolina.²²
- In 2012, North Carolina ranked 11th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 530.3 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 3,446 cases of gonorrhea among young people ages 15–19 reported in North Carolina.²³

- In 2012, North Carolina ranked 22nd in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 2.9 cases per 100,000, compared to the national rate of 4.1 per 100,000. In 2012, there were a total of 19 cases of syphilis among young people ages 15–19 reported in North Carolina.²⁴

FEDERAL FUNDING FOR SEX EDUCATION, TEEN PREGNANCY PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

President's Teen Pregnancy Prevention Initiative

The President's Teen Pregnancy Prevention Initiative (TPPI) funds medically accurate and age-appropriate programs to reduce teen pregnancy. The U.S. Department of Health and Human Services, Office of Adolescent Health (OAH) administers the grant program, which totaled \$105 million in discretionary funding for FY 2013. TPPI consists of two funding tiers that provide grants to local public and private entities. Tier 1 totals \$75 million and provides funding for the replication of evidence-based programs proven to prevent unintended teen pregnancy and address underlying behavioral risk factors. Tier 2 totals \$25 million and provides funding to develop and test additional models and innovative strategies. A portion of the Tier 2 funds, \$15.2 million, was allocated for research and demonstration grants to test innovative approaches, while the remaining funding, \$9.8 million, was allocated for grants to support communitywide initiatives. OAH utilizes the remaining appropriated funds to provide program support, implementation evaluation, and technical assistance to grantees. TPPI also dedicates \$8.5 million in funding to conduct evaluations of individual programs.

TPPI Tier 1: Evidence-Based Programs

The TPPI Tier 1 grant program supports the replication of evidence-based programs proven effective through rigorous evaluation to prevent unintended teen pregnancy and minimize underlying behavioral risk factors or other associated risk factors.

- Local organizations in North Carolina received \$1,604,513 in TPPI Tier 1 funding for FY 2013.
- There are two TPPI Tier 1 grantees in North Carolina: Family Resource Center of Raleigh, Inc., and Iredell-Statesville Schools.

Family Resource Center of Raleigh, Inc., \$796,916 (FY 2013)

The Family Resource Center of Raleigh (FRC) is a nonprofit that aims to help “families acquire skills and resources needed to be economically and socially self-sufficient.”²⁵ The organization focuses its programming on providing services to youth and families, including abstinence-only programming, foster care education and support, parenting training, drop-out prevention, and tax preparation assistance.

FRC previously received abstinence-only-until-marriage (AOUM) funding through the now-defunct Community-Based Abstinence Education (CBAE) grant. The organization was awarded a five-year CBAE grant in FY 2008 and received \$1 million in funding before the grant program was eliminated in 2010. The funding supported the organization's Youth AWAKE (Always Works and Aligns With K12 Education) program, which serves young people ages 11–18 with an “exclusive purpose”: to teach “the social, psychological and health gains to be realized by abstaining from sexual activity until marriage.”²⁶

FRC uses its TPPI Tier 1 grant to continue to support the Youth AWAKE program and provide in-school, abstinence-only programming to young people in five counties: Durham, Edgecombe, Orange, Wake, and Wilson. The organization partners with local schools to implement *Promoting Health Among Teens! (PHAT) — Abstinence-Only Intervention* to young people ages 11–14 in grades 6–9, *Draw the Line/Respect the Line* to students in grades 6–8, and *All4You!* to high school students ages 14–19 attending alternative schools.

FRC implements *PHAT* in the following schools throughout its five-county service area: Charles Darden Middle School, Chewning Middle School, East Garner Middle School, Gravely Hill Middle School, Orange County High School, Rogers-Herr Middle School, Southeast Raleigh High School, Southern High School, and West Edgembe Middle School. FRC implements the intervention to 2,700 students over the course of five years.²⁷ The organization also implements *Draw the Line/Respect the Line* in two counties, which serve 2,700 students. In addition, the organization implements *All4You!* in three alternative schools: Lakeview High School in Durham County, M.E. Phillips High School in Wake County, and Partnership Academy High School in Orange County. This portion of the program serves 300 students over the course of five years.²⁸ It also offers a 90-minute “Parent Prep” workshop that serves as an introduction to the program.²⁹

Iredell-Statesville Schools, \$807,597 (FY 2013)

The Iredell-Statesville school district (I-SS), located in Statesville, North Carolina, serves more than 20,000 students residing in urban, suburban, and rural communities and is one of the 20 largest school districts in North Carolina.³⁰ With its TPPI funding, the school district partners with the Boys & Girls Club of Piedmont, the Iredell County Health Department, the Partnership for Young Children, and the Statesville Housing Authority to implement the Proud and Responsible Communities of Iredell-Statesville Project (PARC). The program delivers evidence-based programming to at-risk young people ages 13–19. Its overall goal is to enable the community to address the needs of the most at-risk youth in order to prevent unintended pregnancy or subsequent pregnancies. I-SS aims to reach 1,500 youth annually through PARC.³¹

I-SS implements PARC programming at 19 sites, including nine middle schools, five high schools, and two alternative schools, as well as at the location sites of its partnering organizations. PARC replicates *Making Proud Choices!* and *Be Proud! Be Responsible! Be Protective!*. Participation requires a signed permission slip from a parent or guardian. The program provides free transportation and childcare to participants. In addition, upon completion of the program, participants receive a \$100 stipend.³²

TPPI Tier 2: Innovative Approaches

The TPPI Tier 2 grant program supports research and demonstration programs in order to develop, replicate, refine, and test additional models and innovative strategies for preventing teenage pregnancy.

- There are no TPPI Tier 2 Innovative Approaches grantees in North Carolina.

TPPI Tier 2: Communitywide Initiatives

The TPPI Tier 2 grant program also supports communitywide initiatives to reduce rates of teenage pregnancy and births in communities with the highest rates. The program awards grants to national organizations as well as state- and community-based organizations. Funded national partners provide training and technical assistance to local grantees. The Centers for Disease Control and Prevention (CDC) administer the grant program in partnership with OAH.

- There is one TPPI Tier 2 Communitywide Initiatives grantee in North Carolina, the Adolescent Pregnancy Prevention Campaign of North Carolina, which received \$1,163,553 for FY 2013.

The Adolescent Pregnancy Prevention Campaign of North Carolina (APPCNC) is a nonprofit based in Durham, North Carolina, that serves to “support North Carolina communities in preventing adolescent pregnancy through advocacy, collaboration and education.”³³ The organization advocates for policy and funding that supports effective pregnancy prevention programs; collaborates with community, state, and national level partners to serve pregnant and parenting teens and underserved communities; and provides education to community stakeholders, educators and health providers, parents, and adolescents on evidence-based approaches to preventing unintended pregnancy among teens.³⁴

The organization's TPPI Tier 2 grant supports coordinated efforts in Gaston County to reduce the teen pregnancy and birth rates by 10% over five years. The initiative—Gaston Youth Connected: Integrating Education and Clinical Services for Gaston County Teens—brings together health care providers, youth-serving agencies, pregnancy prevention programs, and the faith community to implement evidence-based programs as well as provide clinical services and education to youth and parents.

Through the initiative, APPCNC has established three local advisory groups to lead program implementation, including a community advisory panel, youth advisory panel, and a core partner group. Along with providing direct services, the initiative serves to develop the county's infrastructure to provide sustainable teen pregnancy prevention services and access to reproductive health care for youth.³⁵

Division of Adolescent and School Health

The Division of Adolescent and School Health (DASH), within the Centers for Disease Control and Prevention (CDC), provides funding to 17 state and 19 local education agencies to help districts and schools strengthen student health through exemplary sexual health education (ESHE) that emphasizes HIV and other STD prevention, increased access to key sexual health services (SHS), and the establishment of safe and supportive environments (SSE) for students and staff. In addition, DASH funds nine national non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- There was one DASH grantees in North Carolina funded to strengthen student health through ESHE, SHS, and SSE in FY 2013, the North Carolina Department of Public Instruction (\$224,490).

DASH also funds three local education agencies and one NGO 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.

- There were no DASH grantees in North Carolina funded to deliver YMSM programming in FY 2013.

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 Survey (YRBS) and School Health Profiles data for policy and program improvements.

- There was one DASH grantee in North Carolina funded to collect and report YRBS and School Health Profiles data in FY 2013, the North Carolina Department of Public Instruction (\$64,464).

Pregnancy Assistance Fund

The Pregnancy Assistance Fund (PAF), administered by OAH, provides expecting and parenting teens, women, fathers, and their families with a network of support services. Established in FY 2010 through a 10-year authorization (FY 2010–FY 2019) in the Affordable Care Act (ACA), PAF is a \$25 million competitive grant program for state and tribal entities. PAF grants support programs that include at least one of the following four components: 1) support for expectant and parenting student services at institutions of higher education; 2) support for expectant and parenting teens, women, fathers, and their families at high schools and community centers; 3) improved services for pregnant women who are victims of domestic violence, sexual violence, sexual assault, and stalking; and 4) increased public awareness and education services for expectant and parenting teens, women, fathers, and their families. Now in the second round of awards, PAF supports 17 entities in 14 states and three tribal entities, most of which focus their efforts on serving teen parents.

- There is one PAF grantee in North Carolina, the North Carolina Department of Health and Human Services which received \$1,500,000 for FY 2013.

North Carolina Department of Health and Human Services, \$1,500,000 (FY 2013)

The North Carolina Department of Health and Human Services Division of Public Health/Women’s Health Branch partners with several state and local agencies, including the North Carolina Healthy Start Foundation, to implement its Young Moms Connect (YMC) program. YMC promotes six maternal health best practices in the five counties of Bladen, Nash, Onslow, Rockingham and Wayne through training, public information, and education activities. These best practices are: 1) reproductive life planning, 2) smoking cessation using the “5 A’s” counseling method, 3) promotion of healthy weight, 4) early entry and adequate utilization of prenatal care, 5) domestic violence prevention, and 6) utilization of medical homes for non-pregnant women. Pregnant and parenting women between the ages of 13–24 receive health and safety information and resources for themselves or their children that are related to these best practices via social marketing and media outreach. Media methods include a YMC website, a YMC “textMOMS” service that creates a two-way communications channel with young mothers in target counties and is promoted on the radio, and three YMC television ads: one for the free text service “Text4Baby,” one related to healthy choices for pregnant and parenting teen mothers (“Be the Better You”), and “Make a Plan,” which focuses on reproductive life planning.³⁶

Personal Responsibility Education Program

The Personal Responsibility Education Program (PREP) totals \$75 million per year for FYs 2010–2014 and is the first-ever dedicated funding stream for more comprehensive approaches to sexuality education. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) administers the grant. PREP includes a \$55 million state grant program, \$10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) program, \$3.1 million for Tribal PREP, for tribes and tribal organizations, with remaining funds for evaluation, training, and technical assistance. In addition, provisions within the statute for PREP enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP funding by the third year of the program; these competitive PREP (CPREP) grants were awarded to organizations in five states and three territories in FY 2013. Details on the state grant program, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

The PREP state-grant program supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, other STDs. The grant program totals \$55 million per year and allocates funding to individual states. 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.

- The North Carolina Department of Health and Human Services received \$1,515,911 in federal PREP funds for FY 2013.
- The agency provides sub-grants to 11³⁷ local public and private entities.³⁸

The North Carolina Department of Health and Human Services, Division of Public Health implements the state’s PREP grant. Through the grant program PREPare for Success, the agency collaborates with 11 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 25% of teen birth rates.³⁹ 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 on the implementation of *Making Proud Choices!*. Additional sub-grants are allocated to local organizations to implement *Teen Outreach Program (TOP)* in both school- and community-based settings.

Programming is administered in the following counties: Bertie, Columbus, Craven, Graham, Greene, Halifax, Lee, Martin, Robeson, and Vance. Sub-grantees address the following adulthood preparation subjects: healthy relationships, parent-child communication, and healthy life skills.⁴⁰

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. ACF administers the grant program in collaboration with OAH and provides a total of \$10 million in funding directly to local public and private entities.

- There are no PREIS grantees in North Carolina.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of comprehensive 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, homeless youth, youth with HIV/AIDS, pregnant and/or parenting youth who are under 21 years of age, and youth who live in areas with high adolescent birth rates. Programs must 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 2013, 16 tribes and tribal organizations from nine states received a total of \$3.1 million.
- There are 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, other STDs. Organizations and institutions in states and territories that did not apply for PREP formula grants in either of the past two fiscal years were eligible to submit competitive applications for CPREP grants. Thirty-seven grants, totaling \$18.6 million, were awarded in FY 2013 to organizations in American Samoa, the Commonwealth of Northern Mariana Islands, Florida, Guam, Indiana, North Dakota, Texas, and Virginia.

- There are no CPREP grantees in North Carolina.

Title V State Abstinence Education Grant Program

The Title V abstinence-only-until-marriage (Title V AOUM) program, administered by ACF, allocates \$50 million per year to states for FYs 2010–2014. 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 promote abstinence from sexual activity as their exclusive purpose and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must ensure abstinence is an expected outcome.

- The North Carolina Department of Public Instruction received \$1,621,069 in federal Title V AOUM funding for FY 2013.
- The North Carolina Department of Public Instruction provides sub-grants to 19 local education agencies, two universities, and 11 public and private entities.⁴¹
- In North Carolina, the match is provided through in-kind contributions.

The North Carolina Department of Public Instruction provides Title V abstinence-only funding to 32 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 4–6 in both school- and community-based settings.

NORTH CAROLINA

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 19 local education agencies and two universities—Appalachian State University and East Carolina University. The 19 local education agencies include: Allegheny, Anson, Ashe, Bertie, Bladen, Caldwell, Duplin, Edenton/Chowan, Edgecombe, Green, Halifax, Lee, Lenoir, Nash/Rocky Mount, Richmond, Robeson, Scotland, and Swain County schools. Funding is also allocated to the Community in Schools Academy charter school in Robeson County. The following curricula have been approved for use: *Abstinence Works*, *Girls on the Run*, *Making a Difference!*, *Parents Matter!*, *Promoting Health Among Teens! (PHAT)* —*Abstinence-Only Intervention*, *Puberty: The Wonder Years*, *Smart Girls Life Skills Training*, *Why Try*, and *Wise Guys*.⁴²

Competitive Abstinence Education Grant Program

Administered by the ACF, the Competitive Abstinence Education (CAE) grant program provides grants for “abstinence education” as defined by the A–H statute in Title V of the Social Security Act, as well as for mentoring, counseling, and adult supervision that promotes abstinence outside of marriage. As currently implemented by ACF, the programs must also be medically accurate. In FY 2013, \$4.3 million was granted through a competitive application process to 10 grantees across nine states, in addition to the nine grantees implementing the second year of their CAE awards in some overlapping and additional states, for a total of 19 CAE grantees in 14 states.

- There are two CAE grantees in North Carolina: CJH Educational Grant Services, Inc., (\$649,342) and the Public Health Authority of Cabarrus County (\$487,376). At the time of publication, more information on these grantees was not available.

North Carolina TPPI, DASH, PAF, PREP, Title V AOUM, and CAE Funding in FY 2013

Grantee	Award	Fiscal Years
Teen Pregnancy Prevention Initiative (TPPI)		
<i>TPPI Tier 1: Replication of Evidence-Based Programs</i>		
Family Resource Center of Raleigh, Inc.	\$796,916	2010–2014
Iredell-Statesville Schools	\$807,597	
TOTAL	\$1,604,513	
<i>TPPI Tier 2: Communitywide Initiatives</i>		
Adolescent Pregnancy Prevention Campaign of North Carolina	\$1,163,553	2010–2014
TOTAL	\$1,163,553	
Division of Adolescent and School Health (DASH)		
North Carolina Department of Public Instruction	\$288,954	2013–2017
TOTAL	\$288,954	
Pregnancy Assistance Fund (PAF)		
North Carolina Department of Health and Human Services	\$1,500,000	2013
TOTAL	\$1,500,000	

NORTH CAROLINA

Grantee	Award	Fiscal Years
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
North Carolina Department of Health and Human Services	\$1,515,911	2013
TOTAL	\$1,515,911	
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)		
North Carolina Department of Public Instruction	\$1,621,069	2013
TOTAL	\$1,621,069	
Competitive Abstinence Education (CAE) Grant		
CJH Educational Grant Services, Inc.	\$649,342	2013
Public Health Authority of Cabarrus County	\$487,376	2013
TOTAL	\$1,136,718	
GRAND TOTAL		
	\$8,830,718	2013

POINTS OF CONTACT

Adolescent Health Contact⁴³

Rebecca Brown
 Adolescent Health Coordinator
 Division of Public Health
 North Carolina Department of Health and Human Services
 5601 Six Forks Road
 1928 Mail Service Center
 Raleigh, NC 27699-1928
 Phone: (919) 707-5572

PREP State-Grant Coordinator

Merissa Gremminger, MSW
 PREP Coordinator
 Division of Public Health
 North Carolina Department of Health and Human Services
 5601 Six Forks Road
 1929 Mail Service Center
 Raleigh, NC 27699-1929
 Phone: (919) 707-5723

Title V AOUM Grant Coordinator

Nakisha Floyd
 Abstinence Education Consultant
 North Carolina Department of Public Instruction
 6349 Mail Service Center
 Raleigh, NC 27699
 Phone: (919) 807-3942
 Email: nakisha.floyd@dpi.nc.gov

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 2013 began on October 1, 2012, and ended on September 30, 2013.

² N.C. Gen. Stat. § 115C-81(e1)(4),

http://www.ncga.state.nc.us/EnactedLegislation/Statutes/HTML/BySection/Chapter_115C/GS_115C-81.html.

³ N.C. Gen. Stat. § 115C-81(e1)(4)(d); N.C. Gen. Stat. § 115C-81(e1)(4)(e).

⁴ N.C. Gen. Stat. § 115C-81(e1)(4a)(a).

⁵ N.C. Gen. Stat. § 115C-81(e1)(4a)(b).

⁶ N.C. Gen. Stat. § 115C-81(e1)(4); N.C. Gen. Stat. § 115C-81(e1)(4a).

⁷ N.C. Gen. Stat. § 115C-81(e1)(9).

⁸ N.C. Gen. Stat. § 115C-81(e1)(5).

⁹ *Healthful Living: Essential Standards* (Raleigh, NC: North Carolina Department of Public Instruction, 2006), accessed April 14, 2014,

<http://www.dpi.state.nc.us/curriculum/healthfulliving/scos>.

¹⁰ N.C. Gen. Stat. § 115C-81(e1)(7).

¹¹ Kann, Laura, et al., "Youth Risk Behavior Surveillance—United States, 2013," *Surveillance Summaries, Morbidity and Mortality Weekly Report*, Vol. 63, No. 4 (June 13, 2014): accessed July 17, 2014, <http://www.cdc.gov/mmwr/pdf/ss/ss6304.pdf>.

¹² Kost, K., and S. Henshaw, *U.S. Teenage Pregnancies, Births, and Abortions, 2010: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), accessed July 8, 2014, <http://www.guttmacher.org/pubs/USTPtrends10.pdf>, Table 3.1.

¹³ *Ibid.*, Table 3.2.

¹⁴ Martin, J.A., et al., *Births: Final Data for 2012*. National Vital Statistics Reports, Vol. 62, No. 9 (December 30, 2013), accessed July 30, 2014, http://www.cdc.gov/nchs/data/nvsr/nvsr62/nvsr62_09.pdf, Table 12.

¹⁵ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.

¹⁶ Kost, K., and S. Henshaw, *U.S. Teenage Pregnancies, Births, and Abortions, 2010: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), accessed July 8, 2014, <http://www.guttmacher.org/pubs/USTPtrends10.pdf>, Table 3.1.

¹⁷ *Ibid.*, Table 3.2.

¹⁸ Slide 9: "Rates of Diagnosis of HIV Infection among Adolescents Aged 13–19 Years, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1mYVJHs>.

¹⁹ Slide 18: "Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 13–19 Years with HIV Infection, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1mYVJHs>.

²⁰ Slide 10: "Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1mYVJHs>.

²¹ Slide 19: "Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 20–24 Years with HIV Infection, 2011—United States and 6 Dependent Areas," *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), accessed May 30, 2013, <http://bit.ly/1mYVJHs>.

²² NCHHSTP Atlas, "STD Surveillance Data." (Atlanta, GA: Centers for Disease Control and Prevention), accessed June 10, 2013, <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

²³ *Ibid.*

²⁴ *Ibid.*

²⁵ "Family Resource Center of Raleigh," Family Resource Center of Raleigh, accessed August 29, 2011, <http://www.frcofraleigh.org/index.php>.

²⁶ "Youth AWAKE," Family Resource Center of Raleigh, Inc., accessed August 29, 2011, <http://www.frcofraleigh.org/index.php?page=awake>.

²⁷ "Youth AWAKE (Youth Always Works & Aligns With K12 Education) Teenage Pregnancy Prevention Program" *Application for Federal Funds SF-424*, 17, 21.

²⁸ *Ibid.*

²⁹ WAKE, "Family Resource Center of Raleigh, Inc."

³⁰ Iredell-Statesville Schools, "About Us," accessed June 2, 2011, <http://iss.schoolwires.com/page/5>.

³¹ "Iredell-Statesville Schools," Teenage Pregnancy Prevention: Summary of Funded Evidence-Based Programs for 2010, U.S. Department of Health and Human Services, Office of Adolescent Health, accessed April 15, 2014, <http://www.hhs.gov/ash/oah/oah-initiatives/tpp/grantees/tpp-tier1.pdf>.

³² "Proud and Responsible Communities in Iredell-Statesville (PARC)," Iredell-Statesville Schools, accessed June 2, 2011, <http://iss.schoolwires.com/page/701>.

³³ "About Us," Adolescent Pregnancy Prevention Campaign of North Carolina, accessed August 29, 2011, <http://appcnc.org/about-us>.

³⁴ Ibid.

³⁵ Adolescent Pregnancy Prevention Campaign of North Carolina, “APPCNC, Gaston County Awarded \$5.8 million Pregnancy Prevention Grant,” Press Release published September 30, 2010, accessed August 29, 2011, <http://appcnc.org/images/GYC%20Press%20Release%20FINAL.pdf>.

³⁶ “North Carolina Department of Health and Human Services (NC) - Pregnancy Assistance Fund,” Office of Adolescent Health, U.S. Department of Health and Human Services, accessed September 23, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/paf-nc.html>.

³⁷ Sub-grantees include: Albemarle Smart Start Partnership (\$100,000), Appalachian State University (\$352,712), Coalition for Families of Lee County (\$100,000), Columbus County Health Department (\$100,000), Duke University (\$100,000), Graham County Schools (\$100,000), Greene County Health Care (\$100,000), Halifax County Health Department (\$100,000), Infinite Possibilities (\$100,000), Martin-Tyrrell-Washington Health District (\$100,000), and Robeson County Health Department (\$100,000).

³⁸ Information provided by Sydney P. Atkinson, Family Planning and Reproductive Health Unit manager, Division of Public Health, North Carolina Department of Health and Human Services, July 21, 2014.

³⁹ Ibid.

⁴⁰ Ibid.

⁴¹ Specific funding amounts for the 19 local education agency and two university sub-grantees were not available at time of publication. Known sub-grantees include: Alice Aycock Poe Center for Health Education (\$25,500), Center for Child and Family Policy at Duke University (\$76,951), North Carolina Comprehensive School Health Training Center (\$93,588), and several Regional Education Services Alliances (\$10,000 per RESA). Information provided by Nakisha Floyd, abstinence education consultant, North Carolina Department of Public Instruction, June 2, 2014.

⁴² Ibid.

⁴³ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.