



SIECUS

State Profile

CALIFORNIA

In Fiscal Year 2013,¹ the state of California received:

- **Division of Adolescent and School Health funds totaling \$290,000**
- **Personal Responsibility Education Program funds totaling \$6,101,508**

In Fiscal Year 2013, local entities in California received:

- **Teen Pregnancy Prevention Initiative funds totaling \$6,832,711**
- **Division of Adolescent and School Health funds totaling \$1,494,086**
 - **Pregnancy Assistance Fund dollars totaling \$2,204,000**
- **Personal Responsibility Education Innovative Strategies funds totaling \$797,255**
- **Tribal Personal Responsibility Education Program funds totaling \$825,793**
- **Competitive Abstinence Education Grant Program funds totaling \$249,342**

SEXUALITY EDUCATION LAW AND POLICY

California state law does not require schools to teach sexuality education, though they are required to teach HIV/AIDS education to students at least once in middle school and once in high school. If schools do teach additional sexuality education, which they are permitted to do from grades K–12, they must follow certain guidelines.

California state law requires that all instruction be age-appropriate and medically accurate, which is defined as “verified or supported by research conducted in compliance with scientific methods and published in peer-reviewed journals, where appropriate, and recognized as accurate and objective by professional organizations and agencies with expertise in the relevant field, such as the federal Centers for Disease Control and Prevention, the American Public Health Association, the American Academy of Pediatrics, and the American College of Obstetricians and Gynecologists.”²

In addition, California law stipulates: “[I]nstruction and materials shall be appropriate for use with pupils of all races, genders, sexual orientations, ethnic and cultural backgrounds, and pupils with disabilities.”³ Furthermore, programs “may not promote or teach religious doctrine.”⁴ Instruction must also encourage parent-child communication about sexuality.

Beginning in grade 7, all human sexuality instruction must include information about abstinence “while also providing medically accurate information on other methods of preventing pregnancy and sexually transmitted diseases (STDs).”⁵ This instruction must “provide information about the effectiveness and safety of all FDA-approved contraceptive methods in preventing pregnancy, including, but not limited to, emergency contraception.”⁶

CALIFORNIA

Each school district must provide in-service training for all teachers and school employees who teach HIV-prevention education. School districts may contract with outside consultants either to teach students or provide the in-service training. California also mandates that all community-based programs using state funds or state-implemented funds to prevent unintended pregnancies and STDs adhere to requirements similar to those for school-based programs; instruction must be medically accurate, age-appropriate, culturally and linguistically appropriate for its intended audience, and comprehensive.

Parents or guardians may remove their children from sexuality education and/or STD/HIV education classes. This is referred to as an “opt-out” policy.

See California Education Code §§ 51930–51939, California Health and Safety Code §§ 151000–151003, Health Education Content Standards for California Public Schools: Kindergarten Through Grade Twelve, and Health Education Framework for California Public Schools: Kindergarten Through Grade Twelve.

2013 STATE LEGISLATIVE SESSION ACTIVITY

SIECUS is not aware of any recent legislation regarding sexuality education in California.

YOUTH SEXUAL HEALTH DATA

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

California Youth Risk Behavior Survey (YRBS) Data

California chose not to participate in the 2013 YRBS survey. Visit the Centers for Disease Control and Prevention’s [Youth Online database](#) for additional information on sexual behaviors in Los Angeles, San Bernardino, San Diego, and San Francisco.

California Teen Pregnancy, HIV/AIDS, and Other STD Data

Teen Pregnancy, Birth, and Abortion

- In 2010, California’s teen pregnancy rate ranked 21st 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 1,000.⁷ There were a total of 80,970 pregnancies among young women ages 15–19 reported in California in 2010.⁸
- In 2012, California’s teen birth rate ranked 30th in the United States, with a rate of 26.5 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.⁹ In 2012, there were a total of 34,890 live births to young women ages 15–19 reported in California.¹⁰
- In 2010, California’s teen abortion rate ranked eighth in the United States, with a rate of 19 abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹¹ There were a total of 26,540 abortions among young women ages 15–19 reported in California in 2010.¹²

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in California was 4.9 per 100,000, compared to the national rate of 7.6 per 100,000.¹³

CALIFORNIA

- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in California was 1.1 per 100,000, compared to the national rate of 1.9 per 100,000.¹⁴
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in California was 30.4 per 100,000, compared to the national rate of 36.3 per 100,000.¹⁵
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in California was 7.7 per 100,000, compared to the national rate of 10.9 per 100,000.¹⁶

Sexually Transmitted Diseases

- In 2012, California ranked 41st in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 1,441.5 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 39,703 cases of chlamydia reported among young people ages 15–19 in California.¹⁷
- In 2012, California ranked 35th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 178.4 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 4,914 cases of gonorrhea reported among young people ages 15–19 in California.¹⁸
- In 2012, California ranked 19th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 3.4 cases per 100,000, compared to the national rate of 4.1 per 100,000. In 2012, there were a total of 93 cases of syphilis reported among young people ages 15–19 in California.¹⁹

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 2012. 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, underlying behavioral risk factors, or other associated risk factors.

- Local organizations in California received \$5,874,147 in TPPI Tier 1 funding for FY 2013.

- There are seven TPPI Tier 1 grantees in California: Alameda County Public Health Department; Community Action Partnership Network of San Luis Obispo County, Inc.; Contra Costa Health Services; Golden Valley Health Centers; San Diego Youth Services; Tulare Community Health Clinic; and University of Southern California.

Alameda County Public Health Department, \$965,683 (FY 2013)

Alameda County is the seventh most populous county in California. The city of Oakland serves as the county seat. Alameda County Public Health Department (ACPHD) uses its TPPI Tier 1 funding to enhance its already existing initiative, Project HOPE (Helping Oakland and surrounding areas Prevent Teen Pregnancy via Education), “a multifaceted, community driven teen pregnancy prevention program.”²⁰ Project HOPE serves 3,000 youth annually, providing services such as comprehensive sexuality education, peer-leadership education, and education for parents of adolescents. It seeks to reduce unintended teenage pregnancy and absentee fatherhood, promote responsible parenting, and increase the involvement of fathers in their child’s development.²¹ The program targets youth in the West/East Oakland and Ashland/San Lorenzo communities.

With its Tier 1 grant, ACPHD has expanded Project HOPE to target all sixth grade students ages 11–12 who are enrolled in the 18 middle schools within the Oakland Unified School District.²² ACPHD partners with the community-based organizations Asian Health Services and Girls Inc. of Alameda County to implement the program.²³ Project HOPE uses *Making Proud Choices!*, an evidence-based STD-, HIV-, and pregnancy-prevention curriculum designed for use with African-American, Latino, and white adolescents ages 11–13. The overall goal of the expanded program is to reduce the rates of teen pregnancy, HIV, and STDs among at-risk youth living in areas of Oakland with high teen birth rates. ACPHD plans for the program to reach 1,500–1,800 youth each year.

Community Action Partnership Network of San Luis Obispo County, Inc., \$426,507 (FY 2013)

The Community Action Partnership Network of San Luis Obispo County, Inc., (CAPSLO) is a private, nonprofit, public-benefit corporation. In its mission statement, CAPSLO pledges “to empower individuals and families to achieve economic self-sufficiency and self-determination through a comprehensive array of community-based programs and actions,” as part of a commitment to the elimination of the causes of poverty.²⁴ CAPSLO serves a population of 43,000 across San Luis Obispo County and eight other central and southern California counties (Fresno, Kern, Monterey, Orange, Santa Barbara, San Benito, San Joaquin, and Ventura).²⁵ Its services include assistance with employment, housing, medical services, energy subsidies, weatherization, child care, and preschool education.²⁶

With its TPPI funding, CAPSLO implements *Cuidate!*, an evidence-based HIV-prevention curriculum adapted from the evidence-based curriculum *Be Proud! Be Responsible!* and tailored for use with Latino youth ages 13–18. The intervention is based in schools and agency sites across San Luis Obispo County. The overall goal of the program is to emphasize cultural values that influence positive attitudes, beliefs, behavior, and self-efficacy regarding preventing unintended pregnancy and STDs, including HIV. CAPSLO plans for its program to reach approximately 500 youth each year.

Contra Costa Health Services, \$999,117 (FY 2013)

Contra Costa Health Services (CCHS) is a county health system and a department of the Contra Costa County government. Its mission statement is to “care for and improve the health of all people in Contra Costa County with special attention to those who are most vulnerable to health problems.”²⁷ With its TPPI funding, the county health system provides programming to middle and high school students at six middle schools and six high schools in Pittsburg, Richmond, and San Pablo. The intervention uses *Draw the Line/Respect the Line* for middle school students ages 11–14 and *Reducing the Risk* for high-school students ages 14–15.²⁸

Golden Valley Health Centers, \$676,889 (FY 2013)

Golden Valley Health Centers (GVHC) is a private, nonprofit, federally qualified health center system consisting of community health centers that provide comprehensive primary medical and dental care throughout Merced and Stanislaus counties of central California's San Joaquin Valley. These health centers include 21 clinical sites, eight dental sites, two women's health centers, and a homeless health care program.²⁹ GVHC focuses on serving "an ethnically diverse population" of "migrant and seasonal farm workers, Southeast Asian refugees, and the homeless."³⁰ With its TPPI funding, GVHC provides programming to predominantly high-risk females ages 13–19 using *Safer Sex*, a clinic-based intervention designed for female adolescents. The overall goal of GVHC's program is "to reduce the incidence of STDs and improve condom use" among participants.³¹ GVHC will deliver the intervention at 18 of its clinical sites and plans to serve up to 430 young women per year through the program.³²

University of Southern California \$954,527 (FY 201)

The University of Southern California is a private, nonprofit research university located in Los Angeles. With its TPPI funding, the university partnered with the Compton School Unified School District; Los Angeles County Department of Public Health, Division of HIV & STD Programs; and Los Angeles Unified School District to implement "Keeping It Real in L.A." in 24 middle schools in Compton and Los Angeles. The university serves 9,227 youth per year, and "Keeping It Real in L.A." uses the *It's Your Game: Keep it Real* curriculum.

San Diego Youth Services \$1,289,263 (FY 2013)

San Diego Youth Services (SDYS) is a nonprofit charitable organization focused on homeless and at-risk youth. The organization operates 15 major locations in San Diego County and serves more than 9,000 children and their families each year, providing emergency services, professional help, and safe living space.³³

With its TPPI funding, SDYS implements the CAT+ Project, which is an enhancement to SDYS' existing project, Community Assessment Team (CAT), a preventive intervention program that assists families with youth experiencing behavioral, social, or juvenile justice issues. CAT is a collaboration between SDYS and four other San Diego-area agencies: Mental Health Systems, North County Lifeline, Social Advocates for Youth San Diego, and South Bay Community Services.³⁴ The CAT+ Project is a 16-module program implemented in communities in the North Coastal region with historically high rates of teen pregnancy. SDYS' program targets young people ages 13–19 who are either involved in the juvenile justice system or are considered at-risk due to issues such as truancy and homelessness. Youth are referred to the program by probation departments, police departments, schools, community partners, and parents or guardians. CAT+ aims to reduce rates of teen pregnancy and STDs across San Diego County.³⁵ The program primarily serves Latino young people. CAT+ uses *Reducing the Risk*. SDYS plans to reach 1,200 youth annually through the program.³⁶

Tulare Community Health Clinic, \$562,161 (FY 2013)

Tulare Community Health Clinic is a nonprofit health center that provides medical and dental care to the Tulare community. With its TPPI funding, Tulare Community Health Clinic provides programming to middle- and high-school students in Alpaugh and Tulare, which are both rural communities in California. The program uses *Draw the Line/Respect the Line* with students in grades 6–8 and *Reducing the Risk* with ninth grade students. Both curricula are taught by school nurse practitioners and delivered in schools with high migrant-student enrollment. The program serves middle and high school students at Alpaugh School and ninth grade students at four high schools in the Tulare Joint Union High School District: Mission Oaks High School, Tulare Tech Prep High School, Tulare Union High School, and Tulare Western High School. The overall goal of the program is to reduce the incidence of teenage pregnancy in the targeted communities by 20%. Tulare Community Health Clinic aims for the program to reach approximately 1,200 youth each year.³⁷

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.

- Local entities in California received \$958,564 in TPPI Tier 2 Innovative Approaches funding for FY 2012.
- There are two TPPI Tier 2 Innovative Approaches grantees in California: San Bernardino County Superintendent of Schools and Volunteers of America of Los Angeles.

San Bernardino County Superintendent of Schools, \$458,564 (FY 2013)

The Office of the Superintendent of Schools for San Bernardino County uses its TPPI Tier 2 grant to implement and test *Positive Prevention PLUS: Sexual Health Education for California Youth* in seven rural and suburban high schools chosen for their high enrollment of minority or lower-income youth and low academic achievement. *Positive Prevention PLUS* is an adaptation of *Positive Prevention: HIV/STD Prevention Education for California Youth*, which is a “research-validated” HIV/STD-prevention curriculum designed for use with middle and high school students; alternative students, including home-schooled and special education students; and developmentally disabled adults in a classroom setting.³⁸ The program plans to serve approximately 2,500 students each year.³⁹

Volunteers of America Los Angeles, \$500,000 (FY 2013)

Volunteers of America Los Angeles (VOALA) is a community-based “human services organization committed to serving people in need, strengthening families, and building communities.”⁴⁰ It operates a wide variety of youth programs including tutoring, mentoring, and leadership development. Girls Inc. of Greater Los Angeles, a project of Volunteers of America Los Angeles, implements the organization’s TPPI Tier 2 grant and provides programming to middle and high school students in five neighborhoods in Los Angeles: Boyle Heights, East Los Angeles, Hollywood, South Los Angeles, and West Los Angeles. The overall goal of the program is to give young women the support, skills, insights, values, and motivation they need to delay or decrease sexual activity.

The Tier 2 program uses the *Preventing Adolescent Pregnancy Program* curricula series that consists of four medically accurate and age-appropriate curricula: *Growing Up! Body Basics/Growing Together*, *Will Power/Won't Power*, *Taking Care of Business*, and *Health Bridge*. The curricula are interactive, providing information on how to prevent unintended pregnancy and STDs, including HIV.⁴¹ Through the program, participants are referred to community health services as necessary. In addition, Girls Inc. of Greater Los Angeles invites participants’ parents and guardians to annual sexuality education workshops. The program serves 640 young women each year.

TPPI Tier 2: Communitywide Initiatives

The TPPI Tier 2 grant program also supports communitywide initiatives to reduce teen pregnancy and births in communities with the highest rates of both. 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 are no TPPI Tier 2 Communitywide Initiatives grantees in California.

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.

CALIFORNIA

- There were five DASH grantees in California funded to strengthen student health through ESHE, SHS, and SSE in FY 2013: California Department of Education (\$225,000), Los Angeles Unified School District (\$225,000), Oakland Unified School District (\$225,000), San Diego Unified School District (\$224,974), and San Francisco Unified School District (\$224,997).

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 two DASH grantees in California funded to deliver YMSM programming in FY 2013: Los Angeles Unified School District (\$200,000) and San Francisco Unified School District (\$200,000).

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 are five DASH grantees in California funded to collect and report YRBS and School Health Profiles data in FY 2013, the California Department of Education (\$65,000), Los Angeles Unified School District (\$50,000), Oakland Unified School District (\$44,118), San Diego Unified School District (\$49,997), and San Francisco Unified School District (\$50,000).

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.

- Local entities in California received \$2,204,000 in PAF dollars for FY 2013.
- There were two PAF grantees in California: the California Department of Public Health (\$1,500,000) and the Riverside-San Bernardino County Indian Health, Inc. (\$704,000).

California Department of Public Health's Maternal, Child, and Adolescent Health Program

The California Department of Public Health's Maternal, Child, and Adolescent Health Program uses PAF to implement the Adolescent Family Life Program - Positive Youth Development (AFLP PYD). The program targets teens that have custody of a child or are co-parenting with a custodial parent. AFLP PYD uses a positive youth development resiliency framework and life planning support to empower youth to pursue goals that will improve the wellbeing of themselves and their children. Case managers visit participants twice a month and help them develop resilience, problem solving skills, a sense of purpose, increased autonomy, and social competence. AFLP PYD aims to reach over 26,000 expectant and parenting teens across 26 counties in California.⁴²

Riverside-San Bernardino County Indian Health

Riverside-San Bernardino County Indian Health uses PAF to implement its Pregnant and Parenting Teen Program (PPTP), which aims to reduce repeat teen pregnancies, to provide a support system to pregnant and parenting teens and their families, and to equip them with skills to develop healthy relationships and achieve economic self-sufficiency. The program is a combination of in-school prevention education and out-of-school home visiting case management. Prevention education is conducted in high schools using the *Be Proud! Be Responsible! Be Protective!* curriculum, which is culturally adapted to suit the needs of the target population. The project targets the provision of services to expectant and parenting teenagers of any race/ethnicity, but with a particular emphasis on Native American expectant and parenting teen families from the 10 local tribes. The Strengthening Families Program is used for the out-of-school component of the program, which provides wraparound services to support the target population, including increased community awareness and referrals to resources. In addition, a robust fatherhood or male involvement program is implemented to provide marriage enhancement skills to fathers, create positive attitudes about “two parent” parenting, increase economic self-sufficiency, and increase contraception knowledge and use among males.⁴³

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, and other sexually transmitted infections. 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 California Department of Public Health received \$6,101,508 in federal PREP funds for FY 2013.
- The department provides sub-grants to 21⁴⁴ local public and private entities.⁴⁵

The Maternal, Child, and Adolescent Division of the California Department of Public Health implements the state’s PREP grant program in collaboration with 21 local public and private entities. The programming takes place in 19 counties with high teen birth rates and is accessible and open to all youth, but prioritizes African American and Latino adolescents who are at-risk for unintended “motherhood or fatherhood” (ages 10–19) and pregnant and parenting young adults (ages 20–21). At-risk adolescent program categories include youth in or aging out of foster care, group homes, or independent living residences; adolescents in juvenile justice systems; runaway, out-of-school, or homeless youth; LGBTQ youth; and youth with HIV/AIDS. Sub-grantees are required to implement one or more of the following evidence-based programs that have been approved for use:

- *All4You!*
- *Be Proud! Be Responsible!*
- *¡Cuidate!*
- *Making a Difference!*
- *Making Proud Choices!*
- *Sexual Health and Adolescent Risk Prevention (SHARP)*, also known as *HIV Risk Reduction Among Detained Adolescents*

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 is one PREIS grantee in California, Children’s Hospital of Los Angeles, which received \$797,255 in PREIS funds for FY 2013.⁴⁶

Children’s Hospital Los Angeles, \$797,255 (FY 2013)

Children’s Hospital Los Angeles partners with El Nido Family Centers, also located in the greater Los Angeles area, to implement an adaptation of *Project AIM (Adult Identity Mentoring)* called *Teen Parent Project AIM*. The program serves approximately 1,400 young mothers between the ages of 15–19 who have at least one child under seven months of age.

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.
- Five local entities in California received a total of \$825,793 in Tribal PREP funds for FY 2013: California Rural Indian Health Board (\$171,537), Mooretown Rancheria of Maidu Indians of California (\$134,927), Pit River Indian Tribe (\$169,807), Riverside-San Bernardino County Indian Health (\$172,419), and Shingle Springs Band of Miwok Indians–Verona Tract (\$177,103).

Mooretown Rancheria (\$134,927 FY 2013)

The Mooretown Rancheria provides community-based services for Native American young people ages 10–19 who live in Butte County, using *Project AIM (Adult Identity Mentoring)*.⁴⁷

Shingle Springs Band of Miwok Indians (\$177,103 FY 2013)

The Shingle Spring Band of Miwok Indians uses its Tribal PREP grant to implement *SiHLE (Sisters Informing, Healing, Living and Empowering)* after school in El Dorado County, targeting Native American females ages 13–18. The programming addresses parent-child communication, healthy relationships, and adolescent development.

More information on the California Rural Indian Health Board, Pit River Indian Tribe, and Riverside-San Bernardino County Indian Health Tribal PREP grantees was not available at the time of publication.

CALIFORNIA

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. 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 2012 to organizations in American Samoa, the Commonwealth of Northern Mariana Islands, Florida, Guam, Indiana, the Marshall Islands, North Dakota, Palau, Texas, and Virginia.

- There are no CPREP grantees in California.

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.

- California chose not to apply for Title V AOUM funds for FY 2013.

Competitive Abstinence Education Grant Program

Administered by the ACF, the 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 2012, \$4.7 million was granted to nine grantees across eight states through a competitive application process.

- There is one CAE grantee in California, Communities Choosing Adolescent Pregnancy Prevention Program (C-CAPP), which received \$249,342 in FY 2013. C-CAPP uses Peer Health Educators to implement the *Connect to Respect* and *Promoting Health Among Teens (PHAT)* curricula. The target population is youth age 13-18 in San Francisco schools.⁴⁸

California 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>		
Alameda County Public Health Department	\$965,683	2010–2014
Community Action Partnership of San Luis Obispo County, Inc.	\$426,507	2010–2014
Contra Costa Health Services	\$999,117	2010–2014
Golden Valley Health Centers	\$676,889	2010–2014
Health Research Association	\$954,527	2010–2014
San Diego Youth Services	\$1,289,263	2010–2014
Tulare Community Health Clinic	\$562,161	2010–2014
TOTAL	\$5,874,147	

CALIFORNIA

Grantee	Award	Fiscal Years
<i>TPPI Tier 2: Innovative Approaches</i>		
San Bernardino County Superintendent of Schools	\$458,564	2010–2014
Volunteers of America of Los Angeles	\$500,000	2010–2014
TOTAL	\$958,564	
Division of Adolescent and School Health (DASH)		
California Department of Education	\$290,000	2013–2017
Los Angeles Unified School District	\$475,000	2013–2017
Oakland Unified School District	\$269,118	2013–2017
San Diego Unified School District	\$274,971	2013–2017
San Francisco Unified School District	\$474,997	2013–2017
TOTAL	\$1,784,086	
Pregnancy Assistance Fund (PAF)		
California’s Department of Public Health Maternal, Child, and Adolescent Health Program	\$1,500,000	2013
Riverside-San Bernardino Indian Health	\$704,000	2013
TOTAL	\$2,204,000	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
California Department of Public Health (federal grant)	\$6,101,508	2013
TOTAL	\$6,101,508	
<i>Personal Responsibility Education Innovative Strategies</i>		
Children’s Hospital of Los Angeles	\$797,255	2010–2014
TOTAL	\$797,255	
<i>Tribal PREP</i>		
California Rural Indian Health Board, Inc.	\$171,537	2013
Mooretown Rancheria of Maidu Indians of California	\$134,927	2013
Pit River Indian Tribe	\$169,807	2013
Riverside-San Bernardino County Indian Health	\$172,419	2013
Shingle Springs Band of Miwok Indians (Verona Tract)	\$177,103	2013
TOTAL	\$825,793	
Competitive Abstinence Education (CAE)		
Communities Choosing Adolescent Pregnancy Prevention Program	\$249,342	2013
TOTAL	\$249,342	
GRAND TOTAL	\$18,794,695	2013

POINTS OF CONTACT

Adolescent Health Contact⁴⁹

Karen C. Ramstrom, DO, MSPH
 Program Standards Branch Chief
 Maternal, Child and Adolescent Health Program
 Center for Family Health
 California Department of Public Health
 PO Box 997420, MS 8306
 Sacramento, CA 95899-7420
 Phone: (916) 650-0386

PREP State-Grant Coordinator

Yvette Albright, MSW
 Chief, Teen Pregnancy Prevention
 Program Standards Branch
 Maternal Child and Adolescent Health Division
 California Department of Public Health
 PO Box 997420, MS 8306
 Sacramento, CA 95899-7420
 Phone: (916) 650-0372
 Email: yvette.albright@cdph.ca.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 2012 began on October 1, 2011, and ended on September 30, 2012.

² Cal. Ed. Code § 51933(d), <http://www.leginfo.ca.gov/cgi-bin/displaycode?section=edc&group=51001-52000&file=51930-51932>.

³ Cal. Ed. Code § 51933(b)(4), <http://www.leginfo.ca.gov/cgi-bin/displaycode?section=edc&group=51001-52000&file=51933>.

⁴ Cal. Ed. Code § 51933(d)(1).

⁵ Cal. Ed. Code § 51933(b)(8).

⁶ Cal. Ed. Code, § 51933(b)(10).

⁷ 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.

⁸ *Ibid.*, Table 3.2.

⁹ 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.

¹⁰ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.

¹¹ 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.

¹² *Ibid.*, Table 3.2.

¹³ 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/1dbYpAJ>.

¹⁴ 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/1dbYpAJ>.

¹⁵ 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/1dbYpAJ>.

¹⁶ 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/1dbYpAJ>.

- ¹⁷ 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>.
- ¹⁸ Ibid.
- ¹⁹ Ibid.
- ²⁰ Project HOPE, Alameda County Public Health Department, accessed August 29, 2011, <http://www.acphd.org/project-hope.aspx>.
- ²¹ Ibid.
- ²² “Alameda County Public Health Department (CA) - TPP Tier 1,” Office of Adolescent Health, U.S. Department of Health and Human Services, accessed September 18, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-ca-alameda.html>.
- ²³ Ibid.
- ²⁴ Mission Statement, Community Action Partnership Network of San Luis Obispo County, Inc., 2010, accessed April 29, 2011, <http://www.capslo.org>.
- ²⁵ Community Action Partnership Network of San Luis Obispo County, Inc., 2010, accessed April 29, 2011, <http://www.capslo.org>.
- ²⁶ Ibid.
- ²⁷ “About Us,” Contra Costa Health Services, 2000–2014, accessed September 18, 2014, <http://cchealth.org/healthservices/>.
- ²⁸ “Contra Costa Health Services,” Grantees: Contra Costa Health Services (CA) – TPP Tier 1, U.S. Department of Health and Human Services, Office of Adolescent Health, accessed April 8, 2011, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-ca-contra.html>.
- ²⁹ “About GVHC,” Golden Valley Health Centers, 2010, accessed April 21, 2011, http://www.gvhc.org/gvhc_new/index.php?option=com_content&view=article&id=2&Itemid=2&lang=en.
- ³⁰ Ibid.
- ³¹ “Golden Valley Health Centers,” Grantees: Golden Valley Health Centers (CA) – TPP Tier 1, U.S. Department of Health and Human Services, Office of Adolescent Health, accessed April 8, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-ca-golden.html>.
- ³² Ibid.
- ³³ “About Us,” San Diego Youth Services 2010, accessed April 21, 2011, <http://www.sdyouthservices.org/site/PageServer?pagename=learn>.
- ³⁴ “East County Communities Center,” San Diego Youth Services, accessed April 21, 2011, <http://211sandiego.communityos.org/sys/profile.taf?profiletype=service&recordid=654631>.
- ³⁵ “San Diego Youth Services,” Grantees: San Diego Youth Services (CA) – TPP Tier 1, Office of Adolescent Health, U.S. Department of Health and Human Services, accessed April 8, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-ca-san.html>.
- ³⁶ “San Diego Youth Services,” Teenage Pregnancy Prevention: Summary of Funded Evidence-Based Programs for 2010.
- ³⁷ “Tulare Community Health Clinic,” Grantees: Tulare Community Health Clinic (CA) – TPP Tier 1, U.S. Department of Health and Human Services, Office of Adolescent Health, accessed April 8, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/tier1-ca-tulare.html>.
- ³⁸ “Positive Prevention: HIV/STD Education for America’s Youth,” American Red Cross, accessed May 4, 2010, <http://www.positiveprevention.com>.
- ³⁹ “San Bernardino County Superintendent of Schools,” Grantees: San Bernardino County Superintendent of Schools (CA) – TPP Tier 2, U.S. Department of Health and Human Services, Office of Adolescent Health, accessed April 8, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/tier2-ca-san.html>.
- ⁴⁰ “Our Mission,” Volunteers of America Los Angeles, accessed August 30, 2011, <http://www.voala.org/explore/mission.htm>.
- ⁴¹ “About Girls Incorporated: Girls Incorporated Identity Programs,” Girls Inc. of Greater Los Angeles, accessed August 30, 2011, <http://www.girlsinc.org/about/about-girls-inc.html>.
- ⁴² “State of California Department of Public Health Maternal, Child, and Adolescent Health Program (CA) - 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-ca.html>.
- ⁴³ “Riverside-San Bernardino County Indian Health, Inc.,” 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-ca-1.html>.
- ⁴⁴ Sub-grantees include: California Health Collaborative—Kings County (\$89,429), Clinica Sierra Vista—Kern County (\$555,130), Community Action Commission of Santa Barbara County (\$175,282), County of Tulare Health and Human Services Agency (\$309,423), Del Norte County Office of Education (\$50,000), Delta Health Care—San Joaquin County (\$320,497), Fresno County Economic Opportunities Commission (\$557,035), Imperial County Office of Education (\$115,181), Lake County Family Resource Center (\$50,000), Madera County Public Health Department (\$91,475), Monterey County Health Department (\$216,041), Planned Parenthood Mar Monte—Merced County (\$149,844), Planned Parenthood Mar Monte—Yuba County (\$50,000), Planned Parenthood of Orange and San Bernardino—San Bernardino County (\$525,807), Planned Parenthood of the Pacific Southwest—Riverside County (\$463,995), Planned Parenthood Shasta Diablo—Colusa County (\$50,000), Planned Parenthood Shasta Diablo—Glenn County (\$50,000), Riverside Community Health Foundation (\$463,995), San Bernardino County Department of Public Health (\$525,807), Stanislaus County Health Services Agency (\$241,060), Tehama County Department of Education (\$50,000).

CALIFORNIA

⁴⁵ Information provided by Meghan Lewis, program consultant, Program Standards Branch, Maternal, Child and Adolescent Health Program, Center for Family Health, California Department of Public Health, June 5, 2014.

⁴⁶ Information provided by Mona Desai, MPH, senior health services and behavioral research manager, Division of Adolescent Medicine, Children's Hospital Los Angeles, June 20, 2014.

⁴⁷ Information provided by Maria Ramirez, social worker, Mooretown Rancheria on June 9, 2014.

⁴⁸ Information provided by Leslie Juarez, sexual health educator, Communities Choosing Adolescent Pregnancy Prevention Program on June 5, 2014.

⁴⁹ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.