



SIECUS

State Profile

NEW YORK

In Fiscal Year 2013,¹ the state of New York received:

- Division of Adolescent and School Health funds totaling \$65,000
- Personal Responsibility Education Program funds totaling \$2,893,874
- Title V State Abstinence Education Program funds totaling \$2,659,034

In Fiscal Year 2013, local entities in New York received:

- Teen Pregnancy Prevention Initiative funds totaling \$7,708,963
- Division of Adolescent and School Health funds totaling \$300,509
 - Pregnancy Assistance Fund dollars totaling \$1,333,436
- Personal Responsibility Education Innovative Strategies funds totaling \$887,211

SEXUALITY EDUCATION LAW AND POLICY

In New York, health education is required for all students in grades K–12. This instruction must provide information about HIV/AIDS. HIV/AIDS instruction must be taught by teachers who have been given appropriate training and curriculum materials by the board of education or trustees.²

All HIV/AIDS education must “provide accurate information to pupils concerning the nature of the disease, methods of transmission, and methods of prevention.”³ This instruction must be age-appropriate and consistent with community values and “shall stress abstinence as the most appropriate and effective premarital protection against AIDS.”⁴ Each local school board must establish an advisory council to make recommendations on HIV/AIDS instruction.⁵ Local boards of education may provide for the distribution of condoms in schools. They must ensure that all students who have access to the condoms have taken part in an HIV/AIDS education program.⁶

The state does not require or suggest a specific curriculum, but does provide a curriculum framework, the *Learning Standards for Health, Physical Education, and Family and Consumer Sciences at Three Levels*. The framework does not specifically mention sexuality education, though certain topics within sexuality education are included, such as “understanding of the changes that accompany puberty.”⁷

Parents may exempt their children from HIV/AIDS classes as long as the school is given “assurance that the pupil will receive such instruction at home.”⁸ This is referred to as an “opt-out” policy.

See New York Regulations of the Commissioner of Education § 135.3, and *Learning Standards for Health, Physical Education, and Family and Consumer Sciences at Three Levels*.

2013 STATE LEGISLATIVE SESSION ACTIVITY

Bills to Require Comprehensive Sex Education

SB 1291 and the concurrent AB 6705 would require that public schools provide comprehensive, age-appropriate, and medically-accurate sex education. SB 1291 died in committee, however AB 6705 remains in the Committee on Education and carries over to the 2014 legislative session.

Bills to Require a Grant Program for Sex Education

Introduced in January 2013, SB 957 and the concurrent AB 2694 would establish a grant program through the Department of Health for age-appropriate sexual health education. SB 5897, introduced in June 2013, establishes a program within the Department of Health to provide grants to public school districts, boards of cooperative educational services, school-based health centers, and community organizations to support age-appropriate sex education programs. To be eligible for funding, programs must be age-appropriate and medically accurate, among other requirements. The bills were sent to committee and carryover to the 2014 legislative session.

Bill to Require Parental Consent for Grades K–8

AB 6202/SB 4137, introduced in March 2013, would require schools obtain parental consent prior to beginning sex education instruction for grades K–8. The bills were referred to the Committee on Education and carry over to the 2014 legislative session.

YOUTH SEXUAL HEALTH DATA

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

New York Youth Risk Behavior Survey (YRBS) Data⁹

- In 2013, 34.7% of female high school students and 41% of male high school students in New York 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, 2.2% of female high school students and 7.7% of male high school students in New York 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, 26.8% of female high school students and 29% of male high school students in New York 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, 12.4% of female high school students and 11.7% of male high school students in New York 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 New York State and City.

New York Teen Pregnancy, HIV/AIDS, and Other STD Data

Teen Pregnancy, Birth, and Abortion

- In 2010, New York's teen pregnancy rate ranked 14th in the United States, with a rate of 63 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 57 per 1,000.¹⁰ There were a total of 41,590 pregnancies among young women ages 15–19 in New York.¹¹
- In 2012, New York's teen birth rate ranked 44th in the United States, with a rate of 19.7 births per 1,000 young women ages 15–19, compared to the national rate of 29.4 per 1,000.¹² In 2012, there were a total of 12,592 live births to young women ages 15–19 reported in New York.¹³
- In 2010, New York's teen abortion rate ranked first in the United States, with a rate of 32 abortions per 1,000 young women ages 15–19, compared to the national rate of 15 per 1,000.¹⁴ There were a total of 21,310 abortions among young women ages 15–19 reported in New York in 2010.¹⁵

HIV and AIDS

- In 2011, the rate of diagnoses of HIV infection among adolescents ages 13–19 in New York was 12.5 per 100,000, compared to the national rate of 7.6 per 100,000.¹⁶
- In 2011, the rate of AIDS diagnoses among adolescents ages 13–19 in New York was 4.4 per 100,000, compared to the national rate of 1.9 per 100,000.¹⁷
- In 2011, the rate of diagnoses of HIV infection among young adults ages 20–24 in New York was 51.2 per 100,000, compared to the national rate of 36.3 per 100,000.¹⁸
- In 2011, the rate of AIDS diagnoses among young adults ages 20–24 in New York was 18.6 per 100,000, compared to the national rate of 10.9 per 100,000.¹⁹

Sexually Transmitted Diseases

- In 2012, New York ranked 14th in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,272 cases per 100,000, compared to the national rate of 2,001.7 per 100,000. In 2012, there were a total of 30,087 cases of chlamydia among young people ages 15–19 reported in New York.²⁰
- In 2012, New York ranked 17th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 390.6 cases per 100,000, compared to the national rate of 376.8 per 100,000. In 2012, there were a total of 5,172 cases of gonorrhea among young people ages 15–19 reported in New York.²¹
- In 2012, New York ranked 17th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 4.4 cases per 100,000, compared to the national rate of 4.1 per 100,000. In 2012, there were a total of 58 cases of syphilis among young people ages 15–19 reported in New York.²²

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 New York received \$5,232,555 in TPPI Tier 1 funding for FY 2013.
- There are six TPPI Tier 1 grantees in New York: City of Rochester; Grand Street Settlement, Inc.; Morris Heights Health Center; New York City Mission Society; Planned Parenthood of New York City, Inc.; and Program Reach, Inc.

City of Rochester Department of Recreation and Youth Services, \$1,499,705 (FY 2013)

The City of Rochester Department of Recreation and Youth Services works to “enhance the City of Rochester with youth initiatives such as recreation, youth development programs, and a premier park system.”²³ It promotes asset development and diversity through services that include youth employment opportunities, environmental education, and outreach such as anti-gang intervention.

With its TPPI funding, the department partners with five youth-serving agencies to implement *Teen Outreach Program (TOP)* to young people ages 12–17. Programming is delivered to youth after school at 10 recreation centers in areas of Rochester with the highest teen birth rates. Along with implementing *TOP*, the teen pregnancy prevention program provides participants with job-readiness training and referrals to teen pregnancy-related health and social services. The Department of Recreation and Youth Services aims for the program to reach approximately 220 youth annually.

Grand Street Settlement, Inc., \$600,000 (FY 2013)

Grand Street Settlement is a community-based organization that serves 10,000 low-income families and individuals from New York City's Lower East Side each year.²⁴ The organization aims to provide “culturally relevant services that support community-building, advocacy, self-determination and an enhanced quality of life.”²⁵ Its services range from early childhood and youth development programs to community support for adults and seniors.

With its TPPI funding, Grand Street Settlement implements the Carrera-Dempsey Pregnancy Prevention Program, which serves predominately minority, lower-income youth in grades 6–10.

The program uses *Children's Aid Society—Carrera Adolescent Pregnancy Prevention Program (CAS—Carrera)*, an evidence-based positive youth development program designed for students in grades 6–12. Grand Street Settlement delivers the program at community-based sites on the Lower East Side and in Bushwick, Brooklyn. Its overall goal is to reduce the teen pregnancy rate by motivating participants to strive for a productive future and avoid negative behaviors that could hinder their goals. Grand Street Settlements aims for the program to reach approximately 60 youth annually.

Morris Heights Health Center, \$791,715 (FY 2013)

Morris Heights Health Center (MHHC) is a nonprofit located in the Bronx that provides primary health care services (medical, dental, mental/social) to 48,000 residents of the Morris Heights community and its surrounding areas each year. Its mission is to “be the vanguard for quality, affordable and accessible healthcare for all.”²⁶

With its TPPI funding, MHHC implements the Changing the Odds youth development program, which serves primarily African-American and Latino youth ages 11–18 who reside in low-income urban neighborhoods. MHHC implements the program in six of the school-based health centers it operates in the Bronx.²⁷ Changing the Odds replicates the *Teen Outreach Program (TOP)*.

New York City Mission Society, Inc., \$520,302 (FY 2013)

The New York City Mission Society is a nonprofit that began in 1812 as a Christian organization that served primarily immigrants, providing assistance through food relief, clothing, education, and access to health care. Today, the New York Mission Society is a secular organization that focuses on serving African-American and Latino populations in the Bronx and Harlem. It provides education, workforce development, prevention, youth development, community building, and mentoring programs to children, young people, and adults.²⁸

The New York Mission Society uses its TPPI Tier 1 funds to support its Club Real Deal program, a comprehensive teen pregnancy prevention program that targets young people ages 11–12 residing in predominantly African American and Latino poverty-stricken neighborhoods in Central and East Harlem. These communities experience teen birth rates that are 70% higher than the New York City average and 25% higher than the national average. The overall goal of the program is to delay and reduce pregnancy and sexual initiation among teenage participants while increasing reproductive health knowledge and contraceptive use. Club Real Deal replicates *Children's Aid Society—Carrera Adolescent Pregnancy Prevention Program (CAS—Carrera)*, and engages participants during both the academic year and the summer. New York City Mission Society aims for the program to reach 60 young people and will follow the same group throughout the five-year grant period.

Planned Parenthood of New York City, \$611,823 (FY 2013)

Planned Parenthood of New York City (PPNYC) is a nonprofit family planning agency that provides high-quality, affordable reproductive health care to women, men, and young people. It aims to “empower individuals to make independent, informed decisions about their sexual and reproductive lives” and to “provide information and health care, and promote public policies that make those services available to all.”²⁹ PPNYC operates health centers in downtown Manhattan, Brooklyn, Bronx, and Staten Island.

With its TPPI funding, PPNYC provides sexual health programming to middle school-aged youth in Manhattan, the Bronx, and Brooklyn.³⁰ The organization partners with the Partnership for After School Education (PASE) to implement programming after school in community-based settings. PASE is a New York City nonprofit that promotes and supports quality after-school programs. Its network includes more than 1,600 member organizations. The grant funds support the replication of *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. PPNYC aims for the program to serve approximately 1,200-1,500 youth annually.

Program Reach, Inc., \$1,209,010 (FY 2013)

Program Reach is run by Dr. Nanci Coppola, who also runs the Healthy Respect program. Both programs encourage youth to abstain from sex until marriage and serve youth in the Bronx and Westchester County, New York. In August 2011, Dr. Coppola was named “Woman of the Year” by Westchester County Executive Robert Astorino for her “pioneering work in sex education.” The award was sponsored by the Women’s Equality Day Reformed Committee, which was “founded on the principles of feminism, equality, and the protection of human life.” The award was presented at the group’s 10th annual “Women of Vision, Women of Reality” luncheon, during which the keynote speaker talked about the 19th-century American women’s liberation movement and the “work of the suffragettes in promoting the rights of the unborn.”³¹

Program Reach targets high-need, low-income urban African Americans and Latinos ages 11–14 and aims to “reduce HIV/AIDS, unplanned pregnancies and births to teen mothers and fathers.”³² The program implements *Promoting Health Among Teens! (PHAT) — Abstinence-Only Intervention* in Yonkers public schools.

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 is one TPPI Tier 2 Innovative Approaches grantee in New York, EngenderHealth, Inc., which received \$976,408 for FY 2013.

EngenderHealth, \$976,408 (FY 2013)

EngenderHealth is an international reproductive health organization that works to “improve the quality of health care in the world’s poorest communities.”³³ The organization “empowers people to make informed decisions about contraception, trains health professionals to make motherhood safer, promotes gender equity, enhances the quality of HIV/AIDS services, and advocates for positive policy change.”³⁴ It provides services in more than 20 countries across the globe and operates offices internationally and domestically, including three U.S. offices in New York, Washington, DC, and Austin, Texas.

With its Tier 2 grant, EngenderHealth implements *Gender Matters* to youth ages 14–15 in Austin, Texas. *Gender Matters* is an “innovative, science-based intervention designed to address . . . the impact of gender norms on the sexual and reproductive health behaviors of youth.”³⁵ By integrating gender issues into teen pregnancy prevention programming, *Gender Matters* aims to “[influence] traditional beliefs about masculinity and femininity, [advance] more equitable attitudes about relationships and the balance of power within them, and [influence] other gender specific views, such as responsibility for pregnancy prevention and ambivalence about pregnancy.”³⁶

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 New York, the Fund for Public Health in New York, Inc., which received \$1,500,000 for FY 2013.

Fund for Public Health in New York, Inc., \$1,500,000 (FY 2013)

The Fund for Public Health in New York (FPHNY) is a nonprofit “dedicated to the advancement of the health and well-being of all New York City residents.”

Developed by the New York City Department Health and Mental Hygiene, FPHNY partners with foundations, philanthropists, businesses, and community members to advance the health department's agenda, "address pressing public health needs," and educate New Yorkers about protecting their individual health and the health of their families and communities.³⁷

FPHNY's community-wide initiative grant supports the "Bronx Teen Connection," a multi-component teen pregnancy prevention initiative that serves the Hunts Point and Morrisania communities in the South Bronx. The initiative aims to improve teen health and reduce unintended teen pregnancy. FPHNY partners with government agencies, reproductive health service providers, and community-based organizations to implement evidence-based teen pregnancy-prevention programs in local high schools and community-based settings. The initiative also serves to strengthen linkages between school- and community-based health centers and clinical services.³⁸ The five-year initiative seeks to bring about the following outcomes:

- "increased number and percentage of youth within the target community who receive evidence-based and evidence-informed programs to prevent teen pregnancy;
- "increased number and percentage of sexually active youth within the target community who are referred to and use clinical services;
- "increased capacity of community clinics to deliver quality sexual and reproductive health services to teens; and
- "increased engagement of community leaders and stakeholders to support and advocate for proven unintended teen pregnancy prevention approaches and educational supports."³⁹

FPHNY provides training and technical assistance to community partners on program delivery, as well as strategies for institutionalizing services and creating long-term sustainability. The initiative's key partners include the U.S. Department of Health and Human Services, Administration for Children's Services; the Bronx District Public Health Office; and the New York City Department of Education.⁴⁰

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 grantee in New York funded to strengthen student health through ESHE, SHS, and SSE in FY 2013, the New York City Board of Education (\$225,000).

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 New York 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 were two DASH grantees in New York funded to collect and report YRBS and School Health Profiles data in FY 2013, the New York City Board of Education (\$75,509) and the New York State Education Department (\$65,000).

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.

- There is one Pregnancy Assistance Fund grantee in New York, the New York State Department of Health/Health Research, which received \$1,333,436 for FY 2013.

New York State Department of Health/Health Research, \$1,333,436 (FY 2013)

The New York State Department of Health/Health Research uses PAF to partner with the New York State Education Department, community colleges, school districts, and academic institutional partners to implement the Pathways to Success initiative in three areas of New York: the Bronx, Rochester, and Buffalo. Pathways to Success aims to identify and engage expectant and parenting students; assess participants' risks and assets; link participants to community resources and follow referrals to completion; and increase awareness of available supports and resources via a targeted “text4baby” campaign. The communities served will have companion projects at a community college and public school district to facilitate a continuum of services for young people.⁴¹

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 New York State Department of Health received \$2,893,874 in federal PREP funds for FY 2013.
- The agency provides sub-grants to nine⁴² local community-based organizations.⁴³

The New York PREP state-grant program is administered by the New York State Department of Health in collaboration with nine community-based organizations in high-need areas in the state. The sub-grantees serve youth ages 10–19, as well as pregnant and parenting youth under the age of 21, focusing on youth who are low-income, African-American, Latino, involved in the criminal/juvenile justice system, and/or involved in the foster care system. Programming aims to provide comprehensive, age-appropriate, evidence-based, and medically accurate sexuality education; ensure access to comprehensive reproductive healthcare and family planning services; expand opportunities through adult preparation activities; and advance a comprehensive and sustainable local community effort to improve the community environment for adolescents. Counties served include: Bronx, Brooklyn, Broome, Chautauqua, Manhattan, Queens, and Tioga. The New York PREP program requires that sub-grantees use an evidence-based program from the list of 31 approved evidence-based programs by the Office of Adolescent Health for replication with Tier 1 Teen Pregnancy Prevention Initiative funds.⁴⁴

Sub-grantees are implementing one or more of the following evidence-based programs:

- *Be Proud! Be Responsible!*
- *Be Proud! Be Responsible! Be Protective!*
- *¡Cuidate!*
- *Making Proud Choices!*
- *Project AIM (Adult Identity Mentoring)*
- *SiHLE (Sisters Informing, Healing, Living and Empowering)*
- *Teen Choice*
- *Teen Health Project*

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 New York, Cicatelli Associates, Inc., which received \$887,211 for FY 2013.⁴⁵

Cicatelli Associates, Inc., \$887,211 (FY 2013)

Cicatelli Associates is a nonprofit that “uses the transformative power of education and research to foster a more aware, healthy, compassionate and equitable world” and strives to improve the quality of health care and social services available to vulnerable populations.⁴⁶

With its PREIS grant, the organization implements the Development for Youth behavioral intervention to young people ages 12–19 in the New York City foster care system. Developed by Cicatelli Associates in 1996, Development for Youth is a “multi-session, group level intervention developed to reduce sexual risk behaviors among high-risk adolescents in group home settings.”⁴⁷ The intervention has shown positive results in reducing unintended pregnancy and the incidence of STDs, including HIV, along with improving relationship, health, and vocational outcomes among participants. The program aims to serve 600–800 young people.

Tribal Personal Responsibility Education Program (TPREP)

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 New York.

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 New York.

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 New York State Department of Health received \$2,659,034 in federal Title V AOUM funding for FY 2013.
- The agency provides sub-grants to 17⁴⁸ local community-based organizations.⁴⁹
- In New York, sub-grantees will contribute to the match through local government dollars, private dollars, or in-kind services.

The New York State Department of Health administers the New York Title V AOUM program in collaboration with 17 local community-based organizations in counties that experience the highest number of births to adolescents under age 20. Sub-grantees focus on preteens ages 9–12 in after-school and community-based settings. Funds were sub-granted through a competitive application process for the Successfully Transitioning Youth to Adolescence (STYA) initiative, which provide mentoring, counseling, and adult supervision programs to promote abstinence from sexual activity and support a healthy transition to adolescence among preteen youth. New York's STYA initiative "does not utilize direct abstinence education strategies," however, programming and materials used by sub-grantees may not contradict the federal A–H definition of "abstinence education." In addition, all information and materials used by sub-grantees must be medically accurate and consistent with federal Title V AOUM funding requirements. Programming is administered in the following counties: Albany, Bronx, Erie, Kings, Monroe, Nassau, New York, Niagara, Onondaga, Orange, Queens, Suffolk, and Westchester.⁵⁰

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.

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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 no CAE grantees in New York.

New York 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>		
City of Rochester	\$1,499,705	2010–2014
Grand Street Settlement, Inc.	\$600,000	2010–2014
Morris Heights Health Center	\$791,715	2010–2014
New York City Mission Society	\$520,302	2010–2014
Planned Parenthood of New York City, Inc.	\$611,823	2010–2014
Program Reach, Inc.	\$1,209,010	
TOTAL	\$5,232,555	
<i>TPPI Tier 2: Innovative Approaches</i>		
EngenderHealth, Inc.	\$976,408	2010–2014
TOTAL	\$976,408	
<i>TPPI Tier 2: Communitywide Initiatives</i>		
Fund for Public Health in New York, Inc.	\$1,500,000	2010–2014
TOTAL	\$1,500,000	
Division of Adolescent and School Health (DASH)		
New York City Board of Education	\$300,509	2013–2017
New York State Education Department	\$65,000	2013–2017
TOTAL	\$365,509	
Pregnancy Assistance Fund (PAF)		
New York State Department of Health/Health Research, Inc.	\$1,333,436	2013
TOTAL	\$1,333,436	
Personal Responsibility Education Program (PREP)		
<i>PREP State-Grant Program</i>		
New York State Department of Health (federal grant)	\$2,893,874	2013
TOTAL	\$2,893,874	
<i>Personal Responsibility Education Innovative Strategies</i>		
Cicatelli Associates, Inc.	\$887,211	2010–2014
TOTAL	\$887,211	

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Grantee	Award	Fiscal Years
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)		
New York State Department of Health (federal grant)	\$2,659,034	2013
TOTAL	\$2,659,034	
GRAND TOTAL	\$15,848,027	2013

POINTS OF CONTACT

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¹ This refers to the federal government’s fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2013 began on October 1, 2012, and ended on September 30, 2013.

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³ Ibid.

⁴ Ibid.

⁵ Ibid.

⁶ N.Y. Regs. of the Comr. Of Ed. § 135.3(c)(2)(ii).

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⁸ N.Y. Regs. of the Comr. Of Ed. §§ 135.3(b)(2) and (c)(2)(i).

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¹¹ Ibid., Table 3.2.

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¹³ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, <http://www.cdc.gov/nchs/vitalstats.htm>.

- ¹⁴ 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.
- ¹⁵ *Ibid.*, Table 3.2.
- ¹⁶ 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>.
- ¹⁷ 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>.
- ¹⁸ 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>.
- ¹⁹ 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>.
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- ²⁶ Morris Heights Health Center, “About Us,” 2011, accessed September 16, 2014, <http://www.mhhc.org/about-us/>.
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- ³⁴ *Ibid.*
- ³⁵ EngenderHealth, “EngenderHealth Receives Major Grant for Teen Pregnancy Prevention in the United States,” Press Release published October 1, 2010, accessed August 30 2011, <http://www.engenderhealth.org/media/press-releases/2010-10-01-hhs-grant-teen-pregnancy.php>.
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- ³⁷ “Our Mission,” Fund for Public Health in New York, Inc., accessed August 29, 2011, <http://www.fphny.org/about>.
- ³⁸ “Teenage Pregnancy Prevention: Integrating Services, Programs, and Strategies through Communitywide Initiatives – State- and Community-Based Organizations,” Division of Reproductive Health, Centers for Disease Control and Prevention, March 2, 2011, accessed August 29, 2011, <http://www.cdc.gov/TeenPregnancy/State-Community-Orgs.htm>.
- ³⁹ “Fund for Public Health in New York Job Description—Sex Education Coordinator, Bronx Teen Connection,” Fund for Public Health in New York, Inc., October 26, 2010, accessed August 29, 2011, <http://bit.ly/1rrhmkg>.
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- ⁴¹ “New York State Department of Health/Health Research, Inc.,” Office of Adolescent Health, U.S. Department of Health and Human Services, accessed September 16, 2014, <http://www.hhs.gov/ash/oah/grants/grantees/paf-ny.html>.
- ⁴² Sub-grantees: Center for Community Alternatives (\$300,000), Claremont Neighborhood Center (\$300,000), Community Counseling & Meditation (\$300,000), Inwood House (\$300,000), Mothers & Babies Prnatal Network (\$150,000), Research Foundation SUNY

Downstate Medical Center (\$303,700), Woodhull Medical/Mental Health Center (\$325,000), YWCA of the City of NY (\$227,927), and YWCA of Jamestown (\$150,000).

⁴³ Information provided by Barbara Leo, adolescent health director, New York State Department of Health, July 1, 2014.

⁴⁴ Ibid.

⁴⁵ The grantee declined to provide SIECUS with any updated information for FY 2012. Information provided is from FY 2011.

⁴⁶ "Mission," Cicatelli Associates, Inc., accessed February 15, 2014,

http://www.caiglobal.org/caistage/index.php?option=com_content&view=article&id=59&Itemid=165.

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⁴⁸ Sub-grantees: Bellport Boys and Girls Clubs (\$169,352), Big Brothers Big Sisters of NYC (\$61,765), Boys and Girls Clubs of Buffalo (\$145,453), Bronx Lebanon Hospital Center (\$170,509), Catholic Charities of the Diocese of Albany (\$112,455), Central Queens YM and YWHA (\$114,090), Children's Aid Society (\$151,608), Committee for Hispanic Children and Families (170,509), Forestdale (\$85,500), Leadership Training Institute (\$170,509), Harlem RBI (\$71,190), New Alternatives for Children (\$170,509), Niagara Falls Housing Authority (\$170,480), Onondaga County (\$170,000), Orange County Youth Bureau (\$170,000), University of Rochester (\$170,509), and YWCA of Syracuse.

⁴⁹ Information provided by Barbara Leo, adolescent health director, New York State Department of Health, June 27, 2014.

⁵⁰ Ibid.

⁵¹ The person listed represents the designated personnel in the state responsible for adolescent reproductive health.