

State Profiles FISCAL YEAR 2016

GEORGIA

In Fiscal Year 2016,¹ the state of Georgia received:

- Division of Adolescent and School Health funds totaling \$64,994
- Personal Responsibility Education Program funds totaling \$1,738,914
- Title V State Abstinence Education Program funds totaling \$2,958,734

In Fiscal Year 2016, local entities in Georgia received:

- Division of Adolescent and School Health funds totaling \$50,000
- Teen Pregnancy Prevention Program funds totaling \$2,999,319
- Sexual Risk Avoidance Education Program funds totaling \$403,194
- Personal Responsibility Education Innovative Strategies funds totaling \$873,549

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

Schools in Georgia are required by [Georgia Code Annotated §§ 20-2-143](#) to teach sex education and acquired immunodeficiency syndrome (AIDS) prevention education. Georgia law mandates that the state board of education determines minimum guidelines that sex education programs must satisfy. The guidelines created by the board require instruction to “emphasize abstinence from sexual activity until marriage and fidelity in marriage as important personal goals.”² In addition, [Georgia Board of Education Rule 160-4-2-.12](#) states that sex education instruction should address peer pressure and promote “high self-esteem, local community values, and abstinence from sexual activity as an effective method of prevention of pregnancy, sexually transmitted diseases (STDs), and AIDS.”³ Local school boards are largely responsible for deciding specific subjects this education must cover, age-appropriate messages, and the grade level in which topics are introduced.

Parents or guardians may remove their children from all or part of sexuality and/or STD/human immunodeficiency virus (HIV) education by sending written notice to the school. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

The Georgia Department of Education has also established the [Georgia Performance Standards for Health Education](#) for grades K–12. The health education standards act as a “framework for local schools to use in order to create an instructional program that will enable their students to become healthy and capable of academic success.”⁴ Beginning in grade eight, the health education standards address abstinence;

information on abstinence as the “most effective and healthy means of preventing” STDs, including HIV. Sexual violence prevention is included in the grades 9–12 standards.⁵

STATE LEGISLATIVE ACTIVITY

SIECUS tracks all state legislative session activity in our state legislative reports. For more information on bills related to school-based sexuality education that were introduced or passed in 2016, please see [SIECUS' 2016 Sex Ed State Legislative Year-End Report: Top Topics and Takeaways](#).

YOUTH SEXUAL HEALTH DATA

The following sexual health behavior and outcome data represent the most recent information available on adolescent sexual health in Georgia. While data can be a powerful tool to demonstrate the sexuality education and sexual health care needs of young people, it is important to be mindful that these behaviors and outcomes are impacted by systemic inequities present in our society that can and often do affect an individual’s sexual health and wellbeing. Additionally, there are significant limitations as to how and what data are currently collected. Young people are more than outcomes; for advocates, it is important to utilize the data in a manner that tracks our progress and pushes policies forward in a way that respects and supports the dignity of all young lives.

GEORGIA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA⁶

- In 2013, 12.9% of female high school students and 11.6% of male high school students in Georgia reported experiencing physical dating violence in the prior year, compared to 13% of female high school students and 7.4% of male high school students nationwide.
- In 2013, 9.6% of black high school students, 18.1% of Hispanic high school students, and 10.7% of white high school students in Georgia reported experiencing physical dating violence in the prior year, compared to 10.3% of black high school students, 10.4% of Hispanic high school students, and 9.7% of white high school students nationwide.

Visit the Centers for Disease Control and Prevention’s (CDC) [Youth Online](#) database for additional information on sexual behaviors.

GEORGIA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA

Teen Pregnancy, Birth, and Abortion

- In 2011, Georgia had the 11th highest teen pregnancy rate in the United States, with a rate of 59 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.⁷ There were a total of 20,340 pregnancies among young women ages 15–19 reported in Georgia in 2011.⁸
- In 2015, Georgia had the 18th highest teen birth rate in the United States, with a rate of 25.6 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.⁹ There were a total of 9,661 live births to young women ages 15–19 reported in Georgia in 2014, the most recent year of available data.¹⁰

GEORGIA

- In 2011, Georgia had the 14th highest teen abortion rate in the United States, with a rate of 13 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.¹¹ There were a total of 4,320 abortions among young women ages 15–19 reported in Georgia in 2011.¹²

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Georgia was 12.8 per 100,000, compared to the national rate of 5.8 per 100,000.¹³
- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Georgia was 2.5 per 100,000, compared to the national rate of 0.7 per 100,000.¹⁴
- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Georgia was 63.3 per 100,000, compared to the national rate of 31.1 per 100,000.¹⁵
- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Georgia was 15.6 per 100,000, compared to the national rate of 5.6 per 100,000.¹⁶

STDs

- In 2015, Georgia had the 9th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,322.1 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 16,166 cases of chlamydia among young people ages 15–19 reported in Georgia.¹⁷
- In 2015, Georgia had the 12th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 450 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 3,133 cases of gonorrhea among young people ages 15–19 reported in Georgia.¹⁸
- In 2015, Georgia had the 4th highest rate of reported cases of primary and secondary syphilis among young people ages 15–19 in the United States, with an infection rate of 8.9 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 62 cases of syphilis reported among young people ages 15–19 in Georgia.¹⁹

Visit the Office of Adolescent Health’s (OAH) [Georgia Adolescent Health Facts](#) for additional information.

FEDERAL FUNDING FOR SEXUALITY EDUCATION, UNINTENDED TEEN PREGNANCY, HIV AND OTHER STD PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

FISCAL YEAR 2016 FEDERAL FUNDING IN GEORGIA

Grantee	Award
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GEORGIA

Division of Adolescent and School Health (DASH)	
Georgia Department of Public Health	\$64,994
DeKalb County Board of Health	\$50,000
TOTAL	\$114,994
Teen Pregnancy Prevention Program (TPPP)	
TPPP Tier 1B	
Augusta Partnership for Children, Inc.	\$999,820
Morehouse School of Medicine	\$1,249,999
Quest for Change, Inc.	\$749,500
TOTAL	\$2,999,319
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
Georgia Department of Division of Family and Children Services (federal grant)	\$1,752,526
TOTAL	\$1,752,526
Personal Responsibility Education Innovative Strategies (PREIS)	
Future Foundation, Inc.	\$873,549
TOTAL	\$873,549
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	
Georgia Governor's Office of Planning and Budget	\$2,958,734
TOTAL	\$2,958,734
Sexual Risk Avoidance Education Grant Program (SRAE)	
Columbus Wellness Center Outreach & Prevention Project, Inc.	\$403,194
TOTAL	\$403,194
GRAND TOTAL	\$9,088,704

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 state and local education agencies through several funding streams to better student health, implement HIV/STD prevention programs, collect and report data on young people's risk behaviors, and expand capacity-building partnerships.

In FY 2016, DASH provided funding to 18 state and 17 local education agencies to help districts and schools strengthen student health through exemplary sexual health education (ESHE) that emphasizes HIV and other STD prevention, increases access to key sexual health services (SHS), and establishes safe and supportive environments (SSE) for students and staff. DASH funded seven national, non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- In FY 2016, there were no DASH grantees in Georgia funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2).

In addition, DASH funds local education agencies and NGOs to implement multiple program activities to meet the HIV/STD prevention needs of young men who have sex with men (YMSM) and to develop strategic partnerships and collaborations between schools and community-based, mental health, and social services organizations to accomplish this work.

- In FY 2016, there were no DASH grantees in Georgia funded to deliver YMSM programming (1308 Strategy 4).

DASH also provides funding for state, territorial, and local education agencies and state health agencies to establish and strengthen systematic procedures to collect and report Youth Risk Behavior Surveillance (YRBS) and School Health Profiles data for policy and program improvements.

- In FY 2016, there were two DASH grantees in Georgia funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): DeKalb County Board of Health (\$50,000) and the Georgia Department of Public Health (\$64,994).

TEEN PREGNANCY PREVENTION PROGRAM

The Office of Adolescent Health (OAH), within the U.S. Department of Health and Human Services (HHS), administers the Teen Pregnancy Prevention Program (TPPP), which funds evidence-based (or innovative evidence-informed), medically accurate, and age-appropriate programs to reduce teen pregnancy. OAH provides program support, implementation evaluation, and technical assistance to grantees. In FY 2016, total funding for TPPP was \$101 million, with an additional \$6.8 million authorized for evaluation purposes, supporting a total of 84 states, cities, non-profit organizations, school districts, universities, community-based organizations, and tribal organizations that were in year two of five TPPP funding tiers' five-year cooperative agreements in 33 states and territories, including the District of Columbia and the Marshall Islands. OAH provides program support, implementation evaluation, and technical assistance to grantees and receives an additional \$6.8 million in funding for evaluation purposes. There are five TPPP funding tiers:

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

- In FY 2016, there were no TPPP Tier 1A grantees in Georgia.

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

- In FY 2016, there were three TPPP Tier 1B grantees in Georgia: Augusta Partnership for Children, Inc. (\$999,820); Morehouse School of Medicine (\$1,249,999); and Quest for Change, Inc. (\$749,500).
- These local organizations in Georgia received a total of \$2,999,319 in TPPP Tier 1B funding.

AUGUSTA PARTNERSHIP FOR CHILDREN, INC., \$999,820 (FY 2016)

Augusta Partnership for Children, Inc., is a non-profit agency based in Augusta-Richmond County. The organization collaborates with partner agencies, organizations, and individuals to fulfill their mission, which is to “develop and sustain partnerships that provide services to improve the lives of children and their

families.”²⁰ With its TPPP Tier 1B funding, Augusta Partnership for Children, Inc., will implement the Continued Change Initiative to reduce rates of teen pregnancy and sexually transmitted infections (STIs). The initiative targets 1,500 young people annually in five counties in East Central Georgia (Burke, Jefferson, Richmond, Washington, and Wilkes). The initiative aims to mobilize community supporters; provide assistance to technical partners; implement evidence-based programs, including [Making Proud Choices!](#), [Project AIM](#), [Making a Difference!](#), [Reducing the Risk](#), and [Be Proud! Be Responsible!](#) in school- and community-based settings; and develop strong communication strategies.²¹

MOREHOUSE SCHOOL OF MEDICINE, \$1,249,999 (FY 2016)

Morehouse School of Medicine, located in Atlanta, Georgia, is dedicated to “addressing primary health care needs through programs in education, research, and service, with an emphasis on people of color and the underserved urban and rural populations in Georgia, the nation, and the world.”²² The grant funds the Morehouse School of Medicine Teen Pregnancy Prevention Initiative (MSM-TPPI), a multi-faceted community intervention to reduce rates of teen pregnancy. The TPPP Tier 1B program serves young people in seven counties (DeKalb, Dougherty, Grady, Douglas, Jasper, Spalding, and Thomas) by implementing the following evidence-based programs: [Making a Difference!](#), [Teen Health Project](#), [Be Proud! Be Responsible!](#), and [Seventeen Days](#).²³ HPRC provides abstinence education, youth development, sexuality education, and programs to pregnant and parenting girls ages 13–19.²⁴

QUEST FOR CHANGE, INC., \$749,500 (FY 2016)

The mission of Quest for Change, Inc., located in Decatur, Georgia, is to “help individuals and families initiate personal and social change to build, strengthen, and be positive citizens in their communities.”²⁵ The organization focuses on academic performance, juvenile delinquency, and teen pregnancy. With TPPP Tier 1B funding, Quest for Change, Inc., implements the Success for Life project to serve youth in areas of high teen birth rates in southwest Georgia. The organization is partnering with three rural and low-income school districts and community organizations to replicate evidence-based programs, including [Making a Difference!](#), [Making Proud Choices!](#), [Promoting Health Among Teens! Abstinence-Only \(PHAT-AO\)](#), [Draw the Line/Respect the Line](#) and [Love Notes](#). Additionally, the organization plans to engage youth and their parents in their community through workshops and leadership councils. Quest for Change, Inc., aims to reach a minimum of 1,000 young people per year.²⁶

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

- In FY 2016, there were no TPPP Tier 2A grantees in Georgia.

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

- In FY 2016, there were no TPPP Tier 2B grantees in Georgia.

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

- In FY 2016, there were no TPPP Tier 2C grantees in Georgia.

PERSONAL RESPONSIBILITY EDUCATION PROGRAM

The Family and Youth Services Bureau (FYSB), within the Administration for Children and Families (ACF) division of HHS, administers the Personal Responsibility Education Program (PREP), which includes \$75

million for the state-grant program; local entities through the competitively awarded Personal Responsibility Education Innovative Strategies (PREIS) program; and the Tribal PREP, which funds tribes and tribal organizations. In addition, provisions within the PREP statute enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP state grants to apply for funding. Details on the state grants, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

State-grant PREP supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. In FY 2016, 43 states, the District of Columbia, the Federated States of Micronesia, Guam, Puerto Rico, and the Virgin Islands received PREP state-grant funds. The grant does not require states to provide matching funds. Funded programs must discuss abstinence and contraception and place substantial emphasis on both. Programs must also address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- In FY 2016, the Georgia Department of Human Services, Division of Family and Children Services received \$1,752,526 in federal PREP funds.²⁷
- The agency provides sub-grants to 12 local community-based organizations. The sub-grantee information is listed below.²⁸

Sub-grantee	Serving	Amount
Beacon, Inc.	Fulton County	\$38,000
Center for Adolescent Male Development	Clayton County	\$32,000
COMIZIA Care, Inc.	Dekalb and Cobb Counties	\$38,000
Families First, Inc.	Fulton, Dekalb, and Gwinnett Counties	\$38,000
Frontline Ministries, Inc.	Muscogee County	\$38,000
Future Seekers, Inc.	Fulton County	\$32,000
Georgia Department of Public Health	Bibb, Chatham, Clayton, Cobb, Dekalb, Dougherty, Gwinnett, and Richmond Counties	\$380,000
Georgia Campaign for Adolescent Power and Potential	Not reported	\$149,490
Georgia State University	Not reported	\$300,000
Jeryme Brown & Mitchell Smalls Foundation	Clayton County	\$38,000
Mt. Olive Community Outreach Center, Inc.	Dougherty County	\$38,000
University of Georgia – Cooperative Extension Service	Not reported	\$98,124

Georgia’s state PREP program educates young people on both abstinence and contraception for the prevention of unintended pregnancy and STDs, including HIV/AIDS, in school- and community-based settings. Programming targets young people ages 10–19 and pregnant and parenting teens under 21. Additional focus is given to young people from racial or ethnic minorities and young people in foster care,

rural areas, or geographic locations with high teen birth rates.²⁹ Programs address healthy relationships, parent-child communication, financial literacy, and educational success using *Making a Difference!*, *Making Proud Choices!*, *Cuidate!*, *Reducing the Risk*, and *Be Proud! Be Responsible! Be Protective!* curricula. Services are administered in the following counties: Bibb, Chatham, Clayton, Cobb, DeKalb, Dougherty, Fulton, Gwinnett, Muscogee, and Richmond.³⁰

Personal Responsibility Education Innovative Strategies (PREIS)

PREIS supports research and demonstration programs to develop, replicate, refine, and test innovative models for preventing unintended teen pregnancy.

- In FY 2016, there was one PREIS grantees in Georgia: Future Foundation, Inc. (\$873,549).³¹

FUTURE FOUNDATION, INC., \$873,549 (FY 2016)

Future Foundations, Inc., seeks to provide quality education, health, and life skills programs for young people in metropolitan Atlanta, Georgia.³² With its PREIS funds, Future Foundations, Inc., will serve African American young people grades 6-12 and will address healthy relationships, adolescent development, parent-child communication, healthy life-skills, and educational career success. The curricula used includes: *Lion's Quest*, *Filling the Gaps Supplement*, and *Parent Connect*. Through *Parent Connect*, parents will be provided with a clear parenting philosophy and strategies to immediately address child-rearing challenges in order to improve parental effectiveness.³³

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target young people ages 10–19 who are in or are aging out of foster care, young people experiencing homelessness, young people living with HIV/AIDS, young people who live in areas with high rates of adolescent births, and young people under age 21 who are pregnant and/or parenting. In FY 2016, eight tribes and tribal organizations from seven states received a total of \$3,436,621.

- In FY 2016, there were no Tribal PREP grantees in Georgia.

Competitive Personal Responsibility Education Program (CPREP)

CPREP grants support evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Only organizations and institutions in states and territories that did not apply for PREP state grants in either of the first two fiscal years after the call for PREP state-grant applications were eligible to submit competitive applications for CPREP grants. In FY 2016, 21 CPREP grants, totaling \$10.3 million, were awarded to 21 organizations in Florida, Indiana, North Dakota, Texas, and Virginia, as well as in American Samoa, Guam, and the Northern Mariana Islands.

- In FY 2016, Georgia received PREP state-grant funding; therefore, entities in Georgia were not eligible for CPREP.

TITLE V STATE ABSTINENCE EDUCATION GRANT PROGRAM

The Title V state abstinence education grant program for abstinence-only-until-marriage (AOUM) programming, or the Title V AOUM program, is administered by FYSB, within ACF of HHS, and was funded at \$75 million in FY 2016. The Title V AOUM program requires states to provide three state-raised

dollars, or the equivalent in services, for every four federal dollars received. The state match may be provided in part or in full by local groups. All programs funded by Title V AOUM must exclusively promote abstinence from sexual activity and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must encourage abstinence as an expected outcome.

- In FY 2016, the Georgia Governor’s Office of Planning and Budget (GGOPB) received \$2,958,734 in federal Title V AOUM funding.³⁴

With its Title V AOUM funding, GGOPB hopes to serve 45,000 young people ages 10-19 annually, focusing on African American and Latino young people, young people involved in the juvenile justice system, young people living in public housing, and young people who live in communities with high rates of teen pregnancy. Sub-grantees may implement curricula from the following: [Heritage Keepers](#), [Choosing the Best, Real Essentials](#), and [Promoting Health Among Teens! Abstinence-Only \(PHAT-AO\)](#).³⁵ At the time of publication, additional information on Georgia’s implementation of Title V AOUM grant funds was unavailable.

“SEXUAL RISK AVOIDANCE EDUCATION” GRANT PROGRAM

Administered by FYSB within ACF of HHS, the “sexual risk avoidance education” (SRAE), i.e., the AOUM grant program, provides competitive funding for programs that “teach young people to voluntarily refrain from non-marital sexual activity and prevent other youth risk behaviors.” These programs are also required by statute to “teach the benefits associated with self-regulation, success sequencing for poverty prevention, healthy relationships, goal setting, and resisting sexual coercion, dating violence, and other youth risk behaviors such as underage drinking or illicit drug use without normalizing teen sexual activity.” In FY 2016, \$10 million was appropriated for the SRAE grant program and \$8.98 million was awarded to 21 grantees in 12 states through a competitive application process.

- In FY 2016, there was one SRAE grantee in Georgia: Columbus Wellness Center Outreach & Prevention Project, Inc. (\$403,194).³⁶

COLUMBUS WELLNESS CENTER OUTREACH & PREVENTION PROJECT, INC. \$403,194 (FY 2016)

Columbus Wellness Center Outreach & Prevention Project, Inc., (CWCOPP) is a non-profit organization dedicated to serving people in rural issues, focusing on STI and HIV/AIDS education, teen pregnancy prevention, and family planning.³⁷ With its SRAE funds, CWCOPP will serve African American young people ages 10-14 using the [Making a Difference!](#) curriculum.³⁸ At the time of publication, more information on CWCOPP’s use of SRAE funds was unknown.

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¹ This refers to the federal government’s fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2016 began on October 1, 2015, and ended on September 30, 2016.

² Ga. Board of Ed. Rule 160-4-2-.12(c), www.doe.k12.ga.us/External-Affairs-and-Policy/State-Board-of-Education/SBOE%20Rules/160-4-2-.12.pdf.

³ Ibid.

⁴ “Georgia Performance Standards for Health Education,” *Quality Core Curriculum Standards*, (Atlanta, Georgia: Georgia Department of Education, 2002), www.georgiastandards.org/standards/GPS%20Support%20Docs/Health_Education_2-11-2010.pdf.

⁵ Ibid.

⁶ Eaton, Danice K., et. al., “Youth Risk Behavior Surveillance—United States, 2011,” *Surveillance Summaries, Morbidity and Mortality Weekly Report*, vol. 61, no. SS-4 (June 8, 2012), www.cdc.gov/mmwr/pdf/ss/ss6104.pdf.

⁷ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

⁸ Ibid., Table 1.2.

⁹ “Teen Birth Rate Comparison, 2015 Among Girls Age 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/compare/1701>.

¹⁰ “Teen Births in Georgia, Girls 15-19,” The National Campaign to Prevent Teen and Unplanned Pregnancy, <https://thenationalcampaign.org/data/state/Georgia>.

¹¹ Kost, K., and Maddow-Zimet, I., *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

¹² Ibid., Table 1.2.

¹³ Slide 17: “Rates of Diagnoses of HIV Infection among Adolescents Aged 13–19 Years 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.

¹⁴ Slide 20: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Adolescents Aged 13–19 Years, 2015—

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- ¹⁵ Slide 18: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.
- ¹⁶ Slide 21: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Young Adults Aged 20–24 Years, 2015—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2015.pdf.
- ¹⁷ NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.
- ¹⁸ Ibid.
- ¹⁹ Ibid.
- ²⁰ “About Us,” Augusta Partnership for Children, Inc., 2014, www.augustapartnership.org/about-us/.
- ²¹ “August Partnership for Children, Inc.,” Grantees (GA) – TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grants/grantees/tpp/1b/augusta-partnership-for-children-inc.html.
- ²² “About Us,” Morehouse School of Medicine, www.msm.edu/about_us/.
- ²³ “Morehouse School of Medicine,” Grantees (GA) – TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grant-programs/teen-pregnancy-prevention-program-tpp/current-grantees/morehouse-school-of-medicine/index.html.
- ²⁴ “MSM News – Health Promotion Resource Center – New Grant Award,” Morehouse School of Medicine, www.msm.edu/Administration/MarketingandCommunications/MSMNews/MSMNewsDocuments/July2015/TPPGrantAwardJuly2015.pdf.
- ²⁵ “Home,” Quest for Change, Inc., www.questforchange.org/.
- ²⁶ “Quest for Change, Inc.,” Grantees (GA) – TPP Tier 1B, U.S. Department of Health and Human Services, Office of Adolescent Health, www.hhs.gov/ash/oah/grants/grantees/tpp/1b/quest-for-change-inc.html.
- ²⁷ “2016 State Personal Responsibility Education Program (PREP) Awards,” Family and Youth Services Bureau, Administration for Children & Families, U.S. Department of Health & Human Services, www.acf.hhs.gov/fysb/resource/2016-state-prep-awards.
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