In Fiscal Year 2017, the state of Louisiana received:

- Division of Adolescent and School Health funds totaling $58,707
- Personal Responsibility Education Program funds totaling $694,093
- Title V State Abstinence Education Program funds totaling $1,319,100

In Fiscal Year 2017, local entities in Louisiana received:

- Teen Pregnancy Prevention Program funds totaling $2,993,028
- Personal Responsibility Education Innovative Strategies funds totaling $851,681

**SEXUALITY EDUCATION LAW AND POLICY**

**STATE LAW**

Louisiana statute does not require schools to offer sex education, but Louisiana Revised Statute §17:24.4(E) states that “the State Board of Elementary and Secondary Education … shall develop and establish statewide curriculum standards for required subjects to be taught in the public elementary and secondary schools of [the] state.”2 Starting in the 2014-2015 school year, all incoming 9th graders are required to take 1/2 credit of health education.3 Under this authority, the Board of Elementary and Secondary Education promulgated Part LIX, Bulletin 103 to describe the state's health education content standards. From grades 7–12, students learn about sexual abstinence and sexual risk behaviors; in grades 4 and 7–12, students receive human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) and other sexually transmitted disease (STD) education.4

Louisiana Revised Statute §§17:281 mandates that sex education cannot be offered in grades K–6, except in Orleans Parish, which may offer sex education in grade 3 and above. If a student is parenting or pregnant,
schools must provide this education “regardless of the student’s grade level.” The education must be integrated into “an existing course of study such as biology, science, physical hygiene, or physical education.” It cannot include “religious beliefs, practices in human sexuality, nor the subjective moral and ethical judgments of the instructor or other persons. Students shall not be tested, quizzed, or surveyed about their personal or family beliefs or practices in sex, morality, or religion.”

Classes may not include “any sexually explicit materials depicting male or female homosexual activity.” They also may not in “any way counsel or advocate abortion.” In addition, this education must emphasize that:

a. Abstinence from sexual activity outside of marriage is the expected standard for all school-age children;

b. Abstinence from sexual activity is a way to avoid unwanted pregnancy, STDs, including AIDS, and other associated health problems;

c. Each student has the power to control personal behavior and to encourage students to base action on reasoning, self-esteem, and respect for others.

**State Standards**

**Louisiana Revised Statute §§17:279** requires that all public high schools offering home-economics classes must also provide “parenthood education” and include the following topics about family living and community relationships: the consequences of the lack of adequate prenatal care, home management, and the responsibilities of parenthood. In addition, **Louisiana Revised Statutes Annotated §§ 17:263** requires that adoption awareness be included in any health education or appropriate class. This includes instruction on “the benefits of adoption for families wishing to add a child, for potential adoptees, and for persons who are pregnant or who have a child for whom they are unable to care.”

Parents or guardians may remove their children from sex education classes. This is referred to as an “opt-out” policy.
are spread and the best methods for the restriction and prevention of these diseases.” Schools are prohibited from distributing any “contraceptive or abortifacient drug, device, or other similar product.”

STATE LEGISLATIVE SESSION 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 the most recent analysis of state legislative activity, SIECUS’ 2016 Sex Ed State Legislative Year-End Report: Top Topics and Takeaways.

YOUTH SEXUAL HEALTH DATA
Young people are more than their health behaviors and outcomes. For those wishing to support the sexual health and wellbeing of young people, it is important to utilize available data in a manner that tracks our progress and pushes policies forward while respecting and supporting the dignity of all young lives.

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 affect an individual’s sexual health and wellbeing. That is, the context in which a young person’s health behavior and decision-making happens is not reflected in individual data points. Notably, one example demonstrating such inequities are the limitations as to how and what data are currently collected; please be mindful of populations who may not be included in surveys or who may be misrepresented by the data. The data categories and any associated language are taken directly from the respective surveys and are not a representation of SIECUS’ positions or values. For more information regarding SIECUS’ use of data, please read the FY 2017 Executive Summary, A Portrait of Sexuality Education in the States.

LOUISIANA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA
The following sexual health behavior and outcome data represent some of the most recent information available on the health of young people who attend high schools in Louisiana. Though not perfect—for instance, using broad race and ethnicity categories can often distort and aggregate the experiences of a diverse group of respondents—the YRBS is a critical resource for understanding the health behaviors of young people when used carefully and with an awareness of its limitations. Any missing data points indicate either a lack of enough respondents for a subcategory or the state’s decision not to administer a question on the survey. SIECUS commends the Centers for Disease Control and Prevention (CDC) for conducting decades’ worth of field studies to improve the accuracy and relevancy of the YRBS. Like the CDC, SIECUS underlines that “school and community interventions should focus not only on behaviors but also on the determinants of those behaviors.”

Reported never having been tested for HIV
- In 2013, 77.7% of female high school students and 77.2% of male high school students in Louisiana reported never having been tested for HIV, compared to 85.4% of female high school students and 88.8% of male high school students nationwide.
• In 2015, 70.8% of black high school students and 83.2% of white high school students in Louisiana reported never having been tested for HIV, compared to 80.2% of black high school students and 89.3% of white high school students nationwide.

**Reported experiencing physical dating violence**

• In 2013, 16.1% of female high school students and 12.6% of male high school students in Louisiana 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 2015, 17.8% of black high school students and 11% of white high school students in Louisiana reported experiencing physical dating violence in the prior year, compared to 10.3% of black high school students and 9.7% of white high school students nationwide.

Visit the CDC [Youth Online](#) database for additional information on youth risk behaviors.

**LOUISIANA SCHOOL HEALTH PROFILES DATA**

In 2015, the CDC released the School Health Profiles, which measures school health policies and practices and highlights which health topics were taught in schools across the country. Since the data was collected from self-administered questionnaires completed by schools’ principals and lead health education teachers, the CDC notes that one limitation of the School Health Profiles is bias toward the reporting of more positive policies and practices. In the School Health Profiles, the CDC identifies 16 sexual education topics that it believes are critical to a young person’s sexual health. Louisiana did not report information as to instruction on the 16 sexual education topics in secondary schools for the 2013–2014 school year.

<table>
<thead>
<tr>
<th>16 Critical Sexual Education Topics Identified by the CDC</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) How to create and sustain healthy and respectful relationships</td>
</tr>
<tr>
<td>2) Influences of family, peers, media, technology, and other factors on sexual risk behavior</td>
</tr>
<tr>
<td>3) Benefits of being sexually abstinent</td>
</tr>
<tr>
<td>4) Efficacy of condoms</td>
</tr>
<tr>
<td>5) Importance of using condoms consistently and correctly</td>
</tr>
<tr>
<td>6) Importance of using a condom at the same time as another form of contraception to prevent both STDs and pregnancy</td>
</tr>
<tr>
<td>7) How to obtain condoms</td>
</tr>
<tr>
<td>8) How to correctly use a condom</td>
</tr>
<tr>
<td>9) Communication and negotiation skills</td>
</tr>
<tr>
<td>10) Goal-setting and decision-making skills</td>
</tr>
<tr>
<td>11) How HIV and other STDs are transmitted</td>
</tr>
<tr>
<td>12) Health consequences of HIV, other STDs, and pregnancy</td>
</tr>
<tr>
<td>13) Influencing and supporting others to avoid or reduce sexual risk behaviors</td>
</tr>
<tr>
<td>14) Importance of limiting the number of sexual partners</td>
</tr>
<tr>
<td>15) How to access valid and reliable information, products, and services related to HIV, STDs, and pregnancy</td>
</tr>
<tr>
<td>16) Preventive care that is necessary to maintain reproductive and sexual health.</td>
</tr>
</tbody>
</table>

*Source: School Health Profiles, 2014*
Visit the CDC’s School Health Profiles report for additional information on school health policies and practices.

LOUISIANA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA
The following data from the CDC and the Guttmacher Institute represent the most recent state-specific statistics documenting teen pregnancy, birth, abortion, HIV/AIDS, and other STDs. For those wishing to support the sexual health and wellbeing of young people, it is important to use the data to advance their access to comprehensive education, resources, and services. However, the data is not intended to be used in a manner that is stigmatizing or shaming: Young people have the right to make informed decisions about their health and wellbeing, but this right must be accompanied by the ability to access and understand all available choices. Therefore, the following data should be used to advance a young person’s right to make informed decisions about their body and health.

Teen Pregnancy, Birth, and Abortion
- In 2013, Louisiana had the 6th highest reported teen pregnancy rate in the United States, with a rate of 54 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 43 per 1,000.20 There were a total of 8,070 pregnancies among young women ages 15–19 reported in Louisiana in 2013.21

- In 2015, Louisiana had the 6th highest reported teen birth rate in the United States, with a rate of 34.1 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.22 There were a total of 5,055 live births to young women ages 15–19 reported in Louisiana in 2015.23

- In 2013, Louisiana had the 28th highest reported teen abortion rate24 in the United States, with a rate of 7 abortions per 1,000 young women ages 15–19, compared to the national rate of 11 per 1,000.25 There were a total of 1,000 abortions among young women ages 15–19 reported in Louisiana in 2013.26

HIV and AIDS
- In 2015, the reported rate of diagnoses of HIV infection among adolescents ages 13–19 in Louisiana was 16 per 100,000, compared to the national rate of 5.8 per 100,000.27

- In 2015, the reported rate of AIDS diagnoses among adolescents ages 13–19 in Louisiana was 1.2 per 100,000, compared to the national rate of 0.7 per 100,000.28

- In 2015, the reported rate of diagnoses of HIV infection among young adults ages 20–24 in Louisiana was 64 per 100,000, compared to the national rate of 31.1 per 100,000.29

- In 2015, the reported rate of AIDS diagnoses among young adults ages 20–24 in Louisiana was 12.3 per 100,000, compared to the national rate of 5.6 per 100,000.30
STDs

- In 2015, Louisiana had the 2nd highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 3,456.4 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 10,378 cases of chlamydia among young people ages 15–19 reported in Louisiana.\(^{31}\)

- In 2015, Louisiana had the 2nd highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 943.5 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 2,833 cases of gonorrhea among young people ages 15–19 reported in Louisiana.\(^{32}\)

- In 2015, Louisiana had the 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 26.3 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 79 cases of syphilis reported among young people ages 15–19 in Louisiana.\(^{33}\)

Visit the Office of Adolescent Health’s (OAH) Louisiana Adolescent Health Facts for additional information.

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**Federal Funding for Sexuality Education, Unintended Teen Pregnancy, HIV and Other STD Prevention, and Abstinence-Only-Until-Marriage (AOUM) Programs**

**Fiscal Year 2017 Federal Funding in Louisiana**

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Award</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Division of Adolescent and School Health (DASH)</strong></td>
<td></td>
</tr>
<tr>
<td>Louisiana Department of Education</td>
<td>$58,707</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$58,707</td>
</tr>
<tr>
<td><strong>Teen Pregnancy Prevention Program (TPPP)</strong></td>
<td></td>
</tr>
<tr>
<td>TPPP Tier 1B</td>
<td></td>
</tr>
<tr>
<td>Institute of Women and Ethnic Studies</td>
<td>$1,249,999</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$1,249,999</td>
</tr>
<tr>
<td>TPPP Tier 2B</td>
<td></td>
</tr>
<tr>
<td>Policy and Research, LLC</td>
<td>$934,643</td>
</tr>
<tr>
<td>Policy and Research, LLC (TIAASH)</td>
<td>$808,386</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>$1,743,029</td>
</tr>
</tbody>
</table>

**Personal Responsibility Education Program (PREP)**

<table>
<thead>
<tr>
<th>Prep State-Grant Program</th>
<th></th>
</tr>
</thead>
</table>

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SIECUS STATE PROFILES FY2017

www.siecus.org
DIVISION OF ADOLESCENT AND SCHOOL HEALTH
The CDC’s school-based HIV prevention efforts include funding and technical assistance 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 2017, through the CDC’s Division of Adolescent and School Health (DASH), 18 state education agencies and 17 school districts received funding to help the 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 six national, non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- In FY 2017, there were no DASH grantees in Louisiana 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- and other 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 2017, there were no DASH grantees in Louisiana 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 YRBS and School Health Profiles data for policy and program improvements.

- In FY 2017, there was one DASH grantee in Louisiana funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Louisiana Department of Education ($58,707).

TEEN PREGNANCY PREVENTION PROGRAM (TPPP)
OAH, within the U.S. Department of Health and Human Services (HHS), administers TPPP, which funds evidence-based or innovative evidence-informed, medically accurate, and age-appropriate programs to
reduce teen pregnancy. In FY 2017, total funding for TPPP was $101 million, supporting 84 states, cities, non-profit organizations, school districts, universities, community-based organizations, and tribal organizations. These grantees were in year three of five TPPP funding tiers’ five-year cooperative agreements in 33 states, the District of Columbia, and the Marshall Islands. In June 2017, however, 81 of the 84 grantees were notified, without cause or explanation, that their project periods were shortened to just three years, to end on June 30, 2018. Since the other three grantees are on a different grant cycle, they had not yet received notice on the status of their funding at the time of publication. OAH provides program support, implementation evaluation, and technical assistance to grantees and receives an additional $6.8 million in funding for evaluation purposes. Below is information on the five TPPP funding tiers:

Tier 1A: Capacity building to support replication of evidence-based TPP programs.
- In FY 2017, there were no TPPP Tier 1A grantees in Louisiana.

Tier 1B: Replicating evidence-based TPP programs to scale in communities with the greatest need.
- In FY 2017, there was one TPPP Tier 1B grantee in Louisiana: Institute of Women and Ethnic Studies ($1,249,999).

INSTITUTE OF WOMEN AND ETHNIC STUDIES (IWES), $1,249,999 (FY 2017)
IWES is a national non-profit founded in 1993 in response to health disparities among minority women. Headquartered in New Orleans, the organization is “dedicated to improving the physical, mental, and spiritual health and quality of life for women of color and their families, especially those who are socio-economically disadvantaged.”34 IWES maintains strong relationships at the community and grassroots level and works to bring the “voices, perspectives, and experiences of the community” to its partnerships with academic institutions, public health agencies, and policymakers at the federal, state, and local levels.35 The organization promotes health awareness and activism and provides programs and services in the areas of sexual health and prevention, reproductive justice and sexual health advocacy, and mental health and community wellness.

With its TPPP Tier 1 funding, IWES implements the Believe in Youth-Louisiana (BY-LA) program. The program aims to “reduce the rate of teen pregnancy, HIV, and other STDs among young African Americans and Latinos ages 11–19 and promote the long-term sustainability of the BY-LA program.”36 The program targets communities in New Orleans with high teen birth rates. BY-LA will include the implementation of Making Proud Choices! in a variety of school-, community-, and faith-based organizations. IWES aims to reach 4,000 young people per year.37

Tier 2A: Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy.
- In FY 2017, there were no TPPP Tier 2A grantees in Louisiana.

Tier 2B: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.
- In FY 2017, there were two TPPP Tier 2B grantees in Louisiana: Policy and Research, LLC ($934,643) and Policy and Research, LLC, TIAASH ($808,386).
- These local organizations in Louisiana received a total of $1,743,029 in TPPP Tier 2B funding.
POLICY AND RESEARCH, LLC, $934,643 (FY 2017)
Policy and Research, LLC, is a research group committed to “the development of effective public policy.” The group offers services to clients such as government agencies, local government, and community-based organizations and businesses, to research and evaluate services that improves the lives of people. With its TPPP Tier 2B funding, Policy and Research will evaluate Plan A Intervention, which is a stand-alone sexual health video intervention that targets young black and Latina women ages 18-19 seeking care at reproductive health clinics. The video is used to educate young women on effective uses of contraception methods, including long-acting reversible contraception and condoms.

POLICY AND RESEARCH, LLC, TIAASH $808,386 (FY 2017)
Policy and Research, LLC, TIAASH will also evaluate the e-PS-R Practice Self Regulations intervention to understand the impact of trauma on sexual behavior. It is designed for young people ages 14-19 who have experienced trauma and who are receiving outpatient counseling services and is intended to promote optimal sexual decision-making. The study is comprised of 10 structured one-on-one therapy-education sessions executed over a 16-week period. Policy and Research, LLC, TIAASH will target young people who are in foster care or out-of-home placement in New Mexico, North Carolina, Pennsylvania, and South Carolina. Policy and Research, LLC, aims to serve 200 young people per year.

Tier 2C: Effectiveness of TPP programs designed specifically for young males.
- In FY 2017, there were no TPPP Tier 2C grantees in Louisiana.

PERSONAL RESPONSIBILITY EDUCATION PROGRAM (PREP)
The Family and Youth Services Bureau (FYSB), within the Administration for Children and Families (ACF) division of HHS, administers PREP, which was authorized for a total of $75 million in FY 2017 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 through the Competitive Personal Responsibility Education Program (CPREP).

Similar to other programs highlighted in the State Profiles, the grants for the various PREP programs are awarded throughout the year, with several awarded in the final month of the fiscal year for use and implementation throughout the following year. SIECUS reports on funding amounts appropriated in FY 2017 and any programmatic activities that occurred during FY 2017, or October 1, 2016–September 30, 2017. It is important to remember, however, that reported programmatic activities for this period may have utilized FY 2016 funds. Details on the state grants, PREIS, Tribal PREP, and CPREP are included below. More information and clarification surrounding funding announcements are also included below, as well as in the FY 2017 Executive Summary, A Portrait of Sexuality Education in the States.

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, and other STDs. In FY 2017, 44 states, the District of Columbia, the Federated States of Micronesia, Guam, Puerto Rico, the Republic of Palau, and the Virgin Islands received PREP state-grant 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 2017, the Louisiana Department of Health and Hospitals, Office of Public Health, STD/HIV Program received $694,093 in federal PREP funds.41
- The Department sub-grants to seven community-based organizations. The sub-grantee information is listed below.42

<table>
<thead>
<tr>
<th>Sub-grantee</th>
<th>Serving</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>100 Black Men of Metropolitan Baton Rouge, Ltd.</td>
<td>Baton Rouge</td>
<td>Not reported</td>
</tr>
<tr>
<td>Acadiana CARES</td>
<td>Lafayette</td>
<td>Not reported</td>
</tr>
<tr>
<td>Baton Rouge Black Alcoholism Council/Metro Health Education</td>
<td>Baton Rouge</td>
<td>Not reported</td>
</tr>
<tr>
<td>Face to Face Enrichment Center</td>
<td>Hammond</td>
<td>Not reported</td>
</tr>
<tr>
<td>Greater Baton Rouge YMCA</td>
<td>Baton Rouge</td>
<td>Not reported</td>
</tr>
<tr>
<td>The Philadelphia Center in Shreveport</td>
<td>Monroe and Shreveport</td>
<td>Not reported</td>
</tr>
<tr>
<td>SWLA Center for Health Services</td>
<td>Lake Charles</td>
<td>Not reported</td>
</tr>
</tbody>
</table>

The STD/HIV Program of the Louisiana Department of Health and Hospitals administers the state PREP grant along with seven community-based organizations. The program targets young people ages 11–18 who live in geographic areas with high HIV/sexually transmitted infection (STI) and teen birth rates, including in Baton Rouge, Lafayette, Lake Charles, Shreveport, Monroe, and Hammond Parishes. Sub-grantees address healthy relationships, adolescent development, parent-child communication, healthy life skills, and financial literacy. Project Adult Identity Mentoring (Project AIM) is implemented by the Baton Rouge Black Alcoholism Council/Metro Health Education; Wise Guys is used by 100 Black Men of Metropolitan Baton Rouge, Ltd.; and Sisters Informing, Healing, Living, and Empowering (SiHLE) is implemented by the other sub-grantees.43

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, HIV, and other STDs.

- In FY 2017, there was one PREIS grantee in Louisiana: Policy and Research, LLC ($851,681).44

Policy and Research, LLC, $851,681 (FY 2017)
As mentioned above, Policy and Research, LLC, is a research group committed to “the development of effective public policy.” The group offers services to clients such as government agencies, local government, community-based organizations, and businesses to research and evaluate services that improve the lives of people.45 With its PREIS funds, Policy and Research, LLC, will implement the e-PS-R Practice Self Regulations model and will address healthy relationships, adolescent development, and healthy life skills. An estimated 600 young people ages 14-19 will be served annually.46
Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of pregnancy-, HIV-, and other STD-prevention programs among young people 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, 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 2017, eight tribes and tribal organizations from seven states received a total of $3,271,693.

- In FY 2017, there were no Tribal PREP grantees in Louisiana.

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, and other STDs. Only organizations and institutions in states and territories that did not apply for PREP state grants are eligible to submit competitive applications for CPREP grants. In FY 2017, 21 CPREP grants, totaling $10.2 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 2017, Louisiana received PREP state-grant funding; therefore, entities in Louisiana were not eligible for CPREP.

Title V “Abstinence Education” State Grant Program

The Title V “abstinence education” state grant program for AOUM programming, or the Title V AOUM program, is administered by FYSB, within ACF of HHS, and was authorized at $75 million for FY 2017. 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.

- In FY 2017, the Office of Louisiana Youth for Excellence within the Office of the Governor received $1,319,100 in federal Title V AOUM funding.
- At the time of publication, additional information on Louisiana’s sub-grantees and match was unavailable.

The Office of Louisiana Youth for Excellence works with schools, non-profit and faith-based organizations, parents, and the community to administer the Title V grant funds. The office pairs with the Choosing the Best curricula series to provide free programming in middle and high schools in the following state parishes: Ascension, Assumption, Bossier, Caddo, Calcasieu, East Baton Rouge, Evangeline, Grant, Jefferson, Jefferson Davis, Lafourche, Terrebonne, Vermillion, and Webster. An estimated 500 young people will be served annually, with a focus on Native American young people, young people living in poverty, young people in foster care, young people experiencing homelessness, and young lesbian, gay, bisexual, transgender, and questioning (LGBTQ) people.

“Sexual Risk Avoidance Education” (SRAE) Grant Program

Administered by FYSB within ACF of HHS, the SRAE program—a rebranding of the competitive AOUM grant program—provides funding for public and private entities 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 2017, $15 million was appropriated for the SRAE grant program, and $13.5 million was awarded to 27 grantees in 14 states through a competitive application process.

- In FY 2017, there were no SRAE grantees in Louisiana.

POINTS OF CONTACT

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Title V AOUM Program Contact
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Baton Rouge, LA  
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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 2017 began on October 1, 2016, and ended on September 30, 2017.


13 Ibid.


19 Ibid., pg. 51.


21 Ibid., Table 2.6.


24 “Abortion” used in this context refers to legally induced abortions. This rate does not include abortions that occur outside of health care facilities or are unreported. Unfortunately, there is no reliable source of information for actual rates of abortion.


26 Ibid., Table 2.6.


30 Slide 21: “Rates of Diagnosed HIV Infection Classified as Stage 3 (AIDS) among Young Adults Aged 20–24 Years, 2015—


32 Ibid.

33 Ibid.


35 Ibid.


37 Ibid.


42 Information provided by Ty-Runet Bryant, Adolescent Health Coordinator, Louisiana Department of Health, June 19, 2017.

43 Ibid.


47 42 U.S.C. 710, Title V, Section 510 of the Social Security Act, the authorization for the Title V AOUM grant program, defines “abstinence education” as “an educational or motivational program which:

(A) has as its exclusive purpose, teaching the social, psychological, and health gains to be realized by abstaining from sexual activity;

(B) teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children;

(C) teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems;

(D) teaches that a mutually faithful monogamous relationship in context of marriage is the expected standard of human sexual activity;

(E) teaches that sexual activity outside of the context of marriage is likely to have harmful psychological and physical effects;

(F) teaches that bearing children out-of-wedlock is likely to have harmful consequences for the child, the child’s parents, and society;

(G) teaches young people how to reject sexual advances and how alcohol and drug use increases vulnerability to sexual advances; and

(H) teaches the importance of attaining self-sufficiency before engaging in sexual activity.”


