In Fiscal Year 2016, the state of Maryland received:

- Division of Adolescent and School Health funds totaling $79,581
- Personal Responsibility Education Program funds totaling $944,604
- Title V State Abstinence Education Program funds totaling $831,903

In Fiscal Year 2016, local entities in Maryland received:

- Division of Adolescent and School Health funds totaling $50,000
- Teen Pregnancy Prevention Program funds totaling $3,352,072

**Sexuality Education Law and Policy**

**State Law**

Maryland Code of Public General Laws §7–401 requires instruction in health education and the joint development of standards and guidelines for school health programs by the Departments of Education and Health and Mental Hygiene. The Administrative Regulation fulfilling this requirement, *Md. Code Regs. 13A.04.18.01*, mandates that each local school board work with its county health department in establishing a broad school health education program, including “Family Life and Human Sexuality” and “Disease Prevention and Control” instruction, both of which encompass sex education topics, including human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) education. The goals are to enable students to “demonstrate the ability to use human development knowledge, social skills, and health enhancing strategies to promote positive relationships and healthy growth and development throughout the lifecycle;” and “demonstrate the ability to apply prevention and treatment knowledge, skills, and strategies to reduce susceptibility and manage disease.”

The family life and human sexuality component of Maryland’s health education instruction is required to “begin in or prior to the fifth grade,” though “as shortly in advance of puberty as is practical.” Determination of which grade is left to each local school board.

Schools must provide parents or guardians the opportunity to view all instructional materials prior to their use and parents or guardians may remove their children from any or all “Family Life and Human Sexuality” classes. This is referred to as an “opt-out” policy.

**State Standards**

Curriculum development is guided by Maryland’s health education standards, “Maryland Health Education State Curriculum.” Family life and human sexuality is included in grades K-12. Sexual identity, abstinence,
contraception, HIV, and other sexually transmitted diseases (STDs) are all topics of instruction within this recommended framework.

**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 [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 Maryland. 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.

**MARYLAND YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA**

*Reported ever having had sexual intercourse*

- In 2015, 29.8% of female high school students and 35% of male high school students in Maryland reported ever having had sexual intercourse, compared to 39.2% of female high school students and 43.2% of male high school students nationwide.

- In 2015, 45.7% of lesbian, gay, or bisexual (LGB) high school students, 28.1% of high school students who were unsure of their sexual orientation, and 31.1% of heterosexual high school students in Maryland reported ever having had sexual intercourse, compared to 50.8% of LGB high school students, 31.6% of high school students who were unsure of their sexual orientation, and 40.9% of heterosexual high school students nationwide.

- In 2015, 40% of American Indian/Alaska Native (AI/AN) high school students, 9.5% of Asian high school students, 37.4% of black high school students, 37.3% of Hispanic high school students, 41% of Native Hawaiian or other Pacific Islander (NHOPI) high school students, 30.3% of white high school students, and 35.1% of high school students who identified as multiple races in Maryland reported ever having had sexual intercourse, compared to 39.1% of AI/AN high school students, 19.3% of Asian high school students, 48.5% of black high school students, 42.5% of Hispanic high school students, 39.9% of white high school students, and 49.2% of high school students who identified as multiple races nationwide.
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Reported having had sexual intercourse before age 13

- In 2015, 2.4% of female high school students and 7.8% of male high school students in Maryland reported having had sexual intercourse before age 13, compared to 2.2% of female high school students and 5.6% of male high school students nationwide.

- In 2015, 9.1% of LGB high school students, 9.6% of high school students who were unsure of their sexual orientation, and 4.3% of heterosexual high school students in Maryland reported having had sexual intercourse before age 13, compared to 7.3% of LGB high school students, 8.8% of high school students who were unsure of their sexual orientation, and 3.4% of heterosexual high school students nationwide.

- In 2015, 9.4% of AI/AN high school students, 1.4% of Asian high school students, 7.9% of black high school students, 6.8% of Hispanic high school students, 10.9% of NHOPI high school students, 2.7% of white high school students, and 6.6% of high school students who identified as multiple races in Maryland reported having had sexual intercourse before age 13, compared to 1.8% of AI/AN high school students, 0.7% of Asian high school students, 8.3% of black high school students, 5% of Hispanic high school students, 2.5% of white high school students, and 5.8% of high school students who identified as multiple races nationwide.

Reported being currently sexually active

- In 2015, 22.1% of female high school students and 23% of male high school students in Maryland reported being currently sexually active, compared to 29.8% of female high school students and 30.3% of male high school students nationwide.

- In 2015, 30.9% of LGB high school students, 21.1% of high school students who were unsure of their sexual orientation, and 21.7% of heterosexual high school students in Maryland reported being currently sexually active, compared to 35.1% of LGB high school students, 22.9% of high school students who were unsure of their sexual orientation, and 30.1% of heterosexual high school students nationwide.

- In 2015, 28.6% of AI/AN high school students, 6% of Asian high school students, 24.8% of black high school students, 24.4% of Hispanic high school students, 31.9% of NHOPI high school students, 22.5% of white high school students, and 23.4% of high school students who identified as multiple races in Maryland reported being currently sexually active, compared to 31.5% of AI/AN high school students, 12.2% of Asian high school students, 33.1% of black high school students, 30.3% of Hispanic high school students, 30.3% of white high school students, and 35.7% of high school students who identified as multiple races nationwide.

Reported not using a condom during last sexual intercourse

- In 2015, 44.4% of female high school students and 32.7% of male high school students in Maryland reported not using a condom during their last sexual intercourse, compared to 48% of female high school students and 38.5% of male high school students nationwide.
• In 2015, 55% of LGB high school students, 56.4% of high school students who were unsure of their sexual orientation, and 35.7% of heterosexual high school students in Maryland reported not using a condom during their last sexual intercourse, compared to 52.5% of LGB high school students, 47.8% of high school students who were unsure of their sexual orientation, and 42.2% of heterosexual high school students nationwide.

• In 2015, 37% of AI/AN high school students, 35.9% of Asian high school students, 33.9% of black high school students, 42.4% of Hispanic high school students, 40.7% of white high school students, and 44.6% of high school students who identified as multiple races in Maryland reported not using a condom during their last sexual intercourse, compared to 36.3% of black high school students, 44.4% of Hispanic high school students, 43.2% of white high school students, and 48.8% of high school students who identified as multiple races nationwide.

Reported not using any method to prevent pregnancy during last sexual intercourse
• In 2015, 15.3% of female high school students and 13.8% of male high school students in Maryland reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.2% of female high school students and 12.2% of male high school students nationwide.

• In 2015, 32.9% of LGB high school students, 24.4% of high school students who were unsure of their sexual orientation, and 11.4% of heterosexual high school students in Maryland reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 26.4% of LGB high school students, 19.4% of high school students who were unsure of their sexual orientation, and 12.4% of heterosexual high school students nationwide.

• In 2015, 10.6% of AI/AN high school students, 14.5% of Asian high school students, 17.5% of black high school students, 21% of Hispanic high school students, 22.2% of NHOPI high school students, 10.6% of white high school students, and 16.2% of high school students who identified as multiple races in Maryland reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 15.9% of black high school students, 20% of Hispanic high school students, 10.4% of white high school students, and 16.7% of high school students who identified as multiple races nationwide.

Reported never having been tested for HIV
• In 2015, 87.1% of female high school students and 85.8% of male high school students in Maryland reported never having been tested for HIV, compared to 88.9% of female high school students and 90.7% of male high school students nationwide.

• In 2015, 77.1% of LGB high school students, 83.1% of high school students who were unsure of their sexual orientation, and 87.8% of heterosexual high school students in Maryland reported never having been tested for HIV, compared to 81.8% of LGB high school students, 87.2% of high school students who were unsure of their sexual orientation, and 90.7% of heterosexual
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high school students nationwide.

- In 2015, 81.7% of AI/AN high school students, 93.3% of Asian high school students, 81.6% of black high school students, 84% of Hispanic high school students, 81% of NHOPI high school students, 90.3% of white high school students, and 86.2% of high school students who identified as multiple races in Maryland reported never having been tested for HIV, compared to 88.6% of AI/AN high school students, 90.4% of Asian high school students, 83.4% of black high school students, 88.9% of Hispanic high school students, 92% of white high school students, and 86.6% of high school students who identified as multiple races nationwide.

**Reported having been physically forced to have sexual intercourse**

- In 2015, 9.9% of female high school students and 6.2% of male high school students in Maryland reported having been physically forced to have sexual intercourse, compared to 10.3% of female high school students and 3.1% of male high school students nationwide.

- In 2015, 17.9% of LGB high school students, 16.6% of high school students who were unsure of their sexual orientation, and 6.3% of heterosexual high school students in Maryland reported having been physically forced to have sexual intercourse, compared to 17.8% of LGB high school students, 12.6% of high school students who were unsure of their sexual orientation, and 5.4% of heterosexual high school students nationwide.

- In 2015, 14.2% of AI/AN high school students, 5.9% of Asian high school students, 8% of black high school students, 12.3% of Hispanic high school students, 14.6% of NHOPI high school students, 6.6% of white high school students, and 9.8% of high school students who identified as multiple races in Maryland reported having been physically forced to have sexual intercourse, compared to 6.6% of AI/AN high school students, 4.2% of Asian high school students, 7.3% of black high school students, 7% of Hispanic high school students, 6% of white high school students, and 12.1% of high school students who identified as multiple races nationwide.

**Reported experiencing physical dating violence**

- In 2015, 11.2% of female high school students and 8.5% of male high school students in Maryland reported experiencing physical dating violence in the prior year, compared to 11.7% of female high school students and 7.4% of male high school students nationwide.

- In 2015, 20.5% of LGB high school students, 22.4% of high school students who were unsure of their sexual orientation, and 7.7% of heterosexual high school students in Maryland reported experiencing physical dating violence in the prior year, compared to 17.5% of LGB high school students, 24.5% of high school students who were unsure of their sexual orientation, and 8.3% of heterosexual high school students nationwide.

- In 2015, 16.1% of AI/AN high school students, 7.2% of Asian high school students, 9.2% of black high school students, 13.8% of Hispanic high school students, 18.9% of NHOPI high
school students, 8.7% of white high school students, and 13% of high school students who identified as multiple races in Maryland reported experiencing physical dating violence in the prior year, compared to 9.6% of AI/AN high school students, 4.6% of Asian high school students, 10.5% of black high school students, 9.7% of Hispanic high school students, 9% of white high school students, and 16% of high school students who identified as multiple races nationwide.

Reported experiencing sexual dating violence

- In 2015, 13.1% of female high school students and 6.9% of male high school students in Maryland reported experiencing sexual dating violence in the prior year, compared to 15.6% of female high school students and 5.4% of male high school students nationwide.

- In 2015, 20.6% of LGB high school students, 27.1% of high school students who were unsure of their sexual orientation, and 7.8% of heterosexual high school students in Maryland reported experiencing sexual dating violence in the prior year, compared to 22.7% of LGB high school students, 23.8% of high school students who were unsure of their sexual orientation, and 9.1% of heterosexual high school students nationwide.

- In 2015, 16.2% of AI/AN high school students, 8.6% of Asian high school students, 7.8% of black high school students, 14.3% of Hispanic high school students, 19.5% of NHOPI high school students, 10.1% of white high school students, and 12.9% of high school students who identified as multiple races in Maryland reported experiencing sexual dating violence in the prior year, compared to 10.5% of AI/AN high school students, 10.5% of Asian high school students, 10% of black high school students, 10.6% of Hispanic high school students, 10.1% of white high school students, and 14.2% of high school students who identified as multiple races nationwide.

Visit the Centers for Disease Control and Prevention’s (CDC) Youth Online database and Health Risks Among Sexual Minority Youth report for additional information on sexual behaviors.

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

Teen Pregnancy, Birth, and Abortion

- In 2011, Maryland had the 20th highest teen pregnancy rate in the United States, with a rate of 55 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.\(^\text{10}\) There were a total of 10,830 pregnancies among young women ages 15–19 reported in Maryland in 2011.\(^\text{11}\)

- In 2015, Maryland had the 40th highest teen birth rate in the United States, with a rate of 17 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000.\(^\text{12}\) There were a total of 3,379 live births to young women ages 15–19 reported in Maryland in 2014, the most recent year of available data.\(^\text{13}\)

- In 2011, Maryland had the 2nd highest teen abortion rate in the United States, with a rate of 23 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.\(^\text{14}\)
There were a total of 4,610 abortions among young women ages 15–19 reported in Maryland in 2011.\textsuperscript{15}

**HIV and AIDS**

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Maryland was 8.8 per 100,000, compared to the national rate of 5.8 per 100,000.\textsuperscript{16}

- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Maryland was 1.7 per 100,000, compared to the national rate of 0.7 per 100,000.\textsuperscript{17}

- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Maryland was 52.1 per 100,000, compared to the national rate of 31.1 per 100,000.\textsuperscript{18}

- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Maryland was 10.8 per 100,000, compared to the national rate of 5.6 per 100,000.\textsuperscript{19}

**STDs**

- In 2015, Maryland had the 19th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 1,968.2 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 7,615 cases of chlamydia among young people ages 15–19 reported in Maryland.\textsuperscript{20}

- In 2015, Maryland had the 15th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 374.8 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 1,450 cases of gonorrhea among young people ages 15–19 reported in Maryland.\textsuperscript{21}

- In 2015, Maryland had the 15th 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 5.7 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 22 cases of syphilis reported among young people ages 15–19 in Maryland.\textsuperscript{22}

Visit the Office of Adolescent Health’s (OAH) Maryland 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**

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Award</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division of Adolescent and School Health (DASH)</td>
<td></td>
</tr>
</tbody>
</table>
Maryland State Department of Education  $79,581
Baltimore City Public Schools  $50,000
TOTAL  $129,581

**Teen Pregnancy Prevention Program (TPPP)**

TPPP Tier 1B
Baltimore City Health Department  $1,749,000
TOTAL  $1,749,000

TPPP Tier 2B
Healthy Teen Network, Inc.  $723,000
Johns Hopkins University  $880,072
TOTAL  $1,603,072

**Personal Responsibility Education Program (PREP)**

PREP State-Grant Program
Maryland Department of Health and Mental Hygiene (federal grant)  $944,604
TOTAL  $944,604

**Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)**

Maryland Department of Health and Mental Hygiene (federal grant)  $831,903
TOTAL  $831,903

**GRAND TOTAL**  $5,258,160

**DIVISION OF ADOLESCENT AND SCHOOL HEALTH**

The Division of Adolescent and School Health (DASH), within the 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 Maryland 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 are no DASH grantees in Maryland 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 Maryland funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Maryland State Department of Education ($79,581) and Baltimore City Public Schools ($50,000).

**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 Maryland.

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

- In FY 2016, there was one TPPP Tier 1B grantee in Maryland: The Baltimore City Health Department ($1,749,000).

**Baltimore City Health Department, $1,749,000 (FY 2016)**

Baltimore City Health Department (BCHD), along with Baltimore City Schools and seven Title X clinics, will use the TPPP Tier 1B funds to run the U Choose Coalition for young people ages 12-19 in Baltimore City. The project is intended to decrease the teen birth rate by 30 percent by targeting disparities among African American and Hispanic teens and delivering evidence-based programming to them. The program will use the following curricula: *It's Your Game: Keep It Real (TYG)*, *Be Proud! Be Responsible!*, and *Seventeen Days*. BCHD aims to serve at least 15,000 young people per year in the five-year time period of the grant.23

**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 Maryland.

**Tier 2B**: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.
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- In FY 2016, there were no TPPP Tier 2B grantees in Maryland.

Tier 2C: Effectiveness of TPP programs designed specifically for young males.
- In FY 2016, there were two TPPP Tier 2C grantees in Maryland: Healthy Teen Network, Inc., ($723,000) and Johns Hopkins University ($880,072).
- These local organizations in Maryland received a total $1,603,072 in TPPP Tier 2C funding.

HEALTHY TEEN NETWORK, INC., $723,000 (FY 2016)
Healthy Teen Network, Inc., (HTN) is a national membership non-profit organization located in Baltimore. The organization focuses on health from a holistic perspective and works primarily with other organizations and professionals that improve the wellbeing of adolescents. The organization achieves its mission to promote better health outcomes through five strategies: networking and dissemination, research and evaluation, capacity-building assistance, leader development, and public policy. With its TPPP funding, HTN will implement and evaluate Pulse, a mobile application based on the Theory of Planned Behavior and self-efficacy, available in English and Spanish, and designed to “promote sexual and reproductive health and reduce pregnancies.” The nine-month evaluation will consist of a randomized controlled trial involving 2,000 girls nationwide. The application’s impact will be measured by changes in use of effective birth control and clinic utilization for sexual and reproductive health services.

JOHNS HOPKINS UNIVERSITY, $880,072 (FY 2016)
Johns Hopkins University (JHU) is a private research university located in Baltimore. With TPPP funding, JHU will implement and evaluate the intervention, Respecting the Circle of Life: Mind, Body, and Spirit (RCL). This theory-based program is specifically aimed to reduce and change behaviors that result in sexually transmitted infections (STIs) and pregnancy using skill-building activities, role-plays, education, and a family-based component. The program is delivered in small, self-selected groups of young American Indians ages 13-19 and their parent or close family member living on a rural Apache reservation in Arizona. JHU aims to serve 189 young people per year.

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 Maryland Department of Health and Mental Hygiene received $944,604 in federal PREP funds.  
- The department awards sub-grants to eight local health departments and their partners. The sub-grantee information is listed below.

<table>
<thead>
<tr>
<th>Sub-grantee</th>
<th>Serving</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Howard County Health Department</td>
<td>See narrative below</td>
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<tr>
<td>Allegany County Health Department</td>
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<td>Anne Arundel County Health Department</td>
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<td>Baltimore City Health Department</td>
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<td>Prince Georges County Health Department</td>
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<td>Washington County Health Department</td>
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<tr>
<td>Worcester County Health Department</td>
<td>See narrative below</td>
<td>$55,000</td>
</tr>
</tbody>
</table>

Maryland’s PREP state-grant program is managed by the Maternal and Child Health Bureau of the Maryland Department of Health and Mental Hygiene. The department funds eight local health departments and their partners to provide programming in both school and community-based settings. PREP funds serve young people ages 10–19 living in detention centers, group homes, and community- and faith-based organizations and schools, as well as LGBTQ young people. Young people ages 20–21 in Baltimore City foster care are also served. Programming takes place in Allegany, Washington, Wicomico and Worcester counties. Sub-grantees will address adolescent development, parent-child communication, healthy life skills, financial literacy, healthy relationships, and educational and career success using the following approved curricula: *Making Proud Choices!, Promoting Health Among Teens! Abstinence Only (PHAT-AO), and Promoting Health Among Teens! (PHAT)—Comprehensive.*

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 were no PREIS grantees in Maryland.

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 Maryland.
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, Maryland received PREP state-grant funding; therefore, entities in Maryland 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 Maryland Department of Health and Mental Hygiene received $831,903 in federal Title V AOUM funding.\(^3\)
- The department chose to sub-grant to 11 local entities across the state. The sub-grantee information is listed below.\(^3\)
- In Maryland, sub-grantees contribute to the match through in-kind funds.

<table>
<thead>
<tr>
<th>Sub-grantee</th>
<th>Serving</th>
<th>Amount</th>
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<tbody>
<tr>
<td>Baltimore City Health Department</td>
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<tr>
<td>Caroline County Health Department</td>
<td>See narrative below</td>
<td>$50,000</td>
</tr>
<tr>
<td>Garrett County Health Department</td>
<td>See narrative below</td>
<td>$50,000</td>
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<tr>
<td>Family Restoration and Healing Center, Inc.</td>
<td>See narrative below</td>
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<td>Community Builders of Maryland, Ltd.</td>
<td>See narrative below</td>
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<tr>
<td>Hands of Hope, Inc.</td>
<td>See narrative below</td>
<td>$32,250</td>
</tr>
<tr>
<td>Girls, Inc.</td>
<td>See narrative below</td>
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<tr>
<td>Somerset County Health Department</td>
<td>See narrative below</td>
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<tr>
<td>Washington County Health Department</td>
<td>See narrative below</td>
<td>$55,000</td>
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<tr>
<td>Wicomico County Health Department</td>
<td>See narrative below</td>
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</tr>
<tr>
<td>Worcester County Health Department</td>
<td>See narrative below</td>
<td>$55,000</td>
</tr>
</tbody>
</table>

Maryland’s Title V AOUM grant is administered by the Maternal and Child Health Bureau of the Maryland Department of Health and Mental Hygiene. The grant is being used to fund 11 local entities across the state to administer both school- and community-based programs. The program is primarily implemented in public middle and high schools. All schools use the Promoting Health Among Teens! Abstinence Only (PHAT-AO) or
Making a Difference evidence-based curricula in the following counties: Anne Arundel, Caroline County, Garrett County, Prince George’s, Somerset, Washington, Wicomico, and Worcester, as well as in Baltimore City.  

“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 were no SRAE grantees in Maryland.

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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 Maryland Code of Public General Laws §7–401(a) and (b), www.mgaleg.maryland.gov/webmga/frmStatutesText.aspx?article=ged&section=7-401&ext=html&session=2016RS&tab=subject5.
6 Maryland Regulations 13A.04.18.01(F)(3)(b) and (c), [www.dsd.state.md.us/comar/getfile.aspx?file=13a.04.18.01.htm](www.dsd.state.md.us/comar/getfile.aspx?file=13a.04.18.01.htm).
8 Maryland Regulations 13A.04.18.01(F)(5) and (6) and (I)(2)(a), [www.dsd.state.md.us/comar/getfile.aspx?file=13a.04.18.01.htm](www.dsd.state.md.us/comar/getfile.aspx?file=13a.04.18.01.htm).
11 Ibid., Table 1.2.
15 Ibid., Table 1.2.
21 Ibid.
22 Ibid.
27 Ibid.
30 Information provided by Jed Miller, Chief, Child and Adolescent Health, Office of Family and Community Health Services Prevention and Health Promotion Administration, Maryland Department of Health and Mental Hygiene, June 05, 2017. Funds reflect levels for July 01, 2015 – June 30, 2016.
31 Ibid.
MARYLAND

33 Information provided by Jed Miller, Chief, Child and Adolescent Health, Office of Family and Community Health Services Prevention and Health Promotion Administration, Maryland Department of Health and Mental Hygiene, June 05, 2017. Funds reflect levels for July 01, 2015 – June 30, 2016.
34 Ibid.