In Fiscal Year 2016, the state of Oklahoma received:
- Division of Adolescent and School Health funds totaling $65,000
- Personal Responsibility Education Program funds totaling $643,470
- Title V State Abstinence Education Program funds totaling $998,103

In Fiscal Year 2016, local entities in Oklahoma received:
- Teen Pregnancy Prevention Program funds totaling $3,874,600

Sexuality Education Law and Policy

State Law
Oklahoma does not require schools to teach sexuality education. However, according to Oklahoma Statutes 70-11-103.3 and 70-11-105.1, schools are required to provide human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS) prevention education. This education must be limited to the “discussion of the disease AIDS and its spread and prevention.”2 The class must be taught once during either grade 5 or 6, once during grades 7–9, and once during grades 10–12.3 All curricula and materials must be checked for medical accuracy by the Oklahoma Department of Health and must only include “factual medical information for AIDS prevention.”4 Additionally,

D) AIDS prevention education shall specifically teach student that:
1) Engaging in homosexual activity, promiscuous sexual activity, intravenous drug use, or contact with contaminated blood products is now known to be primarily responsible for contact with the AIDS virus;
2) Avoiding the activities specified [above] is the only method of preventing the spread of the virus;
3) Sexual intercourse, with or without condoms, with any person testing positive for HIV antibodies, or any other person infected with HIV, places that individual in a high-risk category for developing AIDS.

E) The program of AIDS prevention education shall teach that abstinence from sexual activity is the only certain means for the prevention of the spread or contraction of the AIDS virus through sexual contact. It shall also teach that artificial means of birth control are not a certain means of preventing the spread of the AIDS virus, and reliance on such methods puts a person at risk for exposure to the disease.5
If a school district chooses to teach sexuality education, all curricula and materials must be approved for medical accuracy by the state and by the district superintendent. All materials must also be available to parents for review. In addition, all sexuality education classes must have as one of their primary purposes “the teaching of or informing students about the practice of abstinence.”

A school district must provide written notification of all sexuality and HIV/AIDS prevention classes. Parents or guardians can submit written notification if they do not want their children to participate in such classes. This is referred to as an “opt-out” policy.

Oklahoma’s Academic Standards for Health Education provides a standard for the development of health curricula. Sexuality education is not mentioned.

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 Oklahoma. 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.

OKLAHOMA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA

- In 2015, 40.9% of female high school students and 43.6% of male high school students in Oklahoma 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, 61.1% of lesbian, gay, or bisexual (LGB) high school students, 26% of high school students who were unsure of their sexual orientation, and 42.8% of heterosexual high school students in Oklahoma 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, 50% of American Indian/Alaska Native (AI/AN) high school students, 39.9% of Hispanic high school students, 42.2% of white high school students, and 39.6% of high school students who identified as multiple races in Oklahoma reported ever having had sexual intercourse, compared to 39.1% of AI/AN high school students, 42.5% of Hispanic high school students,
OKLAHOMA

students, 39.9% of white high school students, and 49.2% of high school students who identified as multiple races nationwide.

Reported having had sexual intercourse before age 13

- In 2015, 2.1% of female high school students and 5.7% of male high school students in Oklahoma 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, 13.2% of LGB high school students, 6.8% of high school students who were unsure of their sexual orientation, and 3.1% of heterosexual high school students in Oklahoma 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, 8.2% of AI/AN high school students, 84.9% of Hispanic high school students, 2.1% of white high school students, and 3.1% of high school students who identified as multiple races in Oklahoma reported having had sexual intercourse before age 13, compared to 1.8% of AI/AN 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, 31.3% of female high school students and 31% of male high school students in Oklahoma 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, 36.5% of LGB high school students, 21% of high school students who were unsure of their sexual orientation, and 31.1% of heterosexual high school students in Oklahoma 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, 35.4% of AI/AN high school students, 27.3% of Hispanic high school students, 31.1% of white high school students, and 29.5% of high school students who identified as multiple races in Oklahoma reported being currently sexually active, compared to 31.5% of AI/AN 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, 43.3% of female high school students and 36.8% of male high school students in Oklahoma 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, 70.2% of LGB high school students and 37.6% of heterosexual high school students in Oklahoma reported not using a condom during their last sexual intercourse, compared to 52.5% of LGB high school students and 42.2% of heterosexual high school students nationwide.

In 2015, 40.8% of white high school students in Oklahoma reported not using a condom during their last sexual intercourse, compared to 43.2% of white high school students nationwide.

Reported not using any method to prevent pregnancy during last sexual intercourse

In 2015, 15.4% of female high school students and 9.9% of male high school students in Oklahoma 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, 43.9% of LGB high school students and 9.6% of heterosexual high school students in Oklahoma reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 26.4% of LGB high school students and 12.4% of heterosexual high school students nationwide.

In 2015, 12.6% of white high school students in Oklahoma reported not using any method to prevent pregnancy during their last sexual intercourse, compared to 10.4% of white high school students nationwide.

Reported never having been tested for HIV

In 2015, 90.2% of female high school students and 90.6% of male high school students in Oklahoma 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, 80.4% of LGB high school students, 96.1% of high school students who were unsure of their sexual orientation, and 90.8% of heterosexual high school students in Oklahoma 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 high school students nationwide.

In 2015, 84% of AI/AN high school students, 93.5% of Hispanic high school students, 91.5% of white high school students, and 92.3% of high school students who identified as multiple races in Oklahoma reported never having been tested for HIV, compared to 88.6% of AI/AN 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, 10.1% of female high school students and 3.2% of male high school students in Oklahoma 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, 18.7% of LGB high school students, 20.6% of high school students who were unsure of their sexual orientation, and 5.3% of heterosexual high school students in Oklahoma 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, 5.4% of AI/AN high school students, 8.9% of Hispanic high school students, 6.6% of white high school students, and 8.3% of high school students who identified as multiple races in Oklahoma reported having been physically forced to have sexual intercourse, compared to 6.6% of AI/AN 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, 8.9% of female high school students and 5.3% of male high school students in Oklahoma 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, 15.1% of LGB high school students and 6.4% of heterosexual high school students in Oklahoma reported experiencing physical dating violence in the prior year, compared to 17.5% of LGB high school students and 8.3% of heterosexual high school students nationwide.

In 2015, 9.7% of Hispanic high school students, 7.5% of white high school students, and 9.2% of high school students who identified as multiple races in Oklahoma reported experiencing physical dating violence in the prior year, compared to 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 3.9% of male high school students in Oklahoma 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, 17.2% of LGB high school students and 7.1% of heterosexual high school students in Oklahoma reported experiencing sexual dating violence in the prior year, compared to 22.7% of LGB high school students and 9.1% of heterosexual high school students nationwide.

In 2015, 11.1% of Hispanic high school students, 9% of white high school students, and 14.9% of high school students who identified as multiple races in Oklahoma reported experiencing sexual dating violence in the prior year, compared to 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.
OKLAHOMA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA

Teen Pregnancy, Birth, and Abortion

- In 2011, Oklahoma had the 6th highest teen pregnancy rate in the United States, with a rate of 65 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000. There were a total of 8,140 pregnancies among young women ages 15–19 reported in Oklahoma in 2011.

- In 2015, Oklahoma had the 2nd highest teen birth rate in the United States, with a rate of 34.8 births per 1,000 young women ages 15–19, compared to the national rate of 22.3 per 1,000. There were a total of 4,802 live births to young women ages 15–19 reported in Oklahoma in 2014, the most recent year of available data.

- In 2011, Oklahoma had the 40th highest teen abortion rate in the United States, with a rate of 7 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000. There were a total of 830 abortions among young women ages 15–19 reported in Oklahoma in 2011.

HIV and AIDS

- In 2015, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Oklahoma was 3.8 per 100,000, compared to the national rate of 5.8 per 100,000.

- In 2015, the rate of AIDS diagnoses among adolescents ages 13–19 in Oklahoma was 0.5 per 100,000, compared to the national rate of 0.7 per 100,000.

- In 2015, the rate of diagnoses of HIV infection among young adults ages 20–24 in Oklahoma was 18.8 per 100,000, compared to the national rate of 31.1 per 100,000.

- In 2015, the rate of AIDS diagnoses among young adults ages 20–24 in Oklahoma was 3.8 per 100,000, compared to the national rate of 5.6 per 100,000.

STDs

- In 2015, Oklahoma had the 10th highest rate of reported cases of chlamydia among young people ages 15–19 in the United States, with an infection rate of 2,285.7 cases per 100,000, compared to the national rate of 1,857.8 per 100,000. In 2015, there were a total of 5,887 cases of chlamydia among young people ages 15–19 reported in Oklahoma.

- In 2015, Oklahoma had the 8th highest rate of reported cases of gonorrhea among young people ages 15–19 in the United States, with an infection rate of 506.3 cases per 100,000, compared to the national rate of 341.8 per 100,000. In 2015, there were a total of 1,304 cases of gonorrhea among young people ages 15–19 reported in Oklahoma.

- In 2015, Oklahoma had the 23rd 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 3.9 cases per 100,000, compared to the national rate of 5.4 per 100,000. In 2015, there were a total of 10 cases of syphilis reported among young people ages 15–19 in Oklahoma.
OKLAHOMA

Visit the Office of Adolescent Health’s (OAH) Oklahoma 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 OKLAHOMA

<table>
<thead>
<tr>
<th>Grantee</th>
<th>Award</th>
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<tbody>
<tr>
<td>Division of Adolescent and School Health (DASH)</td>
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<tr>
<td>Oklahoma State Department of Health</td>
<td>$65,000</td>
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<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$65,000</strong></td>
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<tr>
<td>Teen Pregnancy Prevention Program (TPPP)</td>
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<tr>
<td>TPPP Tier 1B</td>
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<tr>
<td>Choctaw Nation of Oklahoma</td>
<td>$1,175,000</td>
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<tr>
<td>Oklahoma City County Health Department</td>
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<td>Youth Services of Tulsa, Inc.</td>
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<td><strong>TOTAL</strong></td>
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<tr>
<td>Personal Responsibility Education Program (PREP)</td>
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<td>PREP State-Grant Program</td>
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<td>Oklahoma State Department of Health (federal grant)</td>
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<td><strong>TOTAL</strong></td>
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<td>Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)</td>
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<td><strong>GRAND TOTAL</strong></td>
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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 Oklahoma 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 Oklahoma 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 was one DASH grantee in Oklahoma funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1): The Oklahoma Department of Health ($65,000).

**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 Oklahoma.

**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 Oklahoma: Choctaw Nation of Oklahoma ($1,175,000); Oklahoma City County Health Department ($1,200,000); and Youth Services of Tulsa, Inc. ($1,499,600)
- These local organizations in Oklahoma received a total of $3,874,600 in TPPP Tier 1B funding.

**CHOCTAW NATION OF OKLAHOMA, $1,175,000 (FY 2016)**

The Choctaw Nation is located in southeast Oklahoma and is dedicated to “enhance the lives of all members through opportunities designed to develop healthy, successful, and productive lifestyles.”24 With its TPPP Tier 1B funding, the Choctaw Nation of Oklahoma will offer programming to young Native Americans in the Choctaw, McCurtain, and Pushmataha counties. The following curricula will be provided in school-based settings: *Draw the Line/Respect the Line, Safer Choices*, and *All4You!*. The Choctaw Nation of Oklahoma aims to
reach 4,500 young people per year and at least 18,000 young people over the course of the five-year grant period.25

OKLAHOMA CITY COUNTY HEALTH DEPARTMENT, $1,200,000 (FY 2016)
Oklahoma City County Health Department will partner with the Oklahoma County Teen Pregnancy Prevention Collaboration to administer the TPPP Tier 1B funds. Programming will be provided to young people ages 12-19 in five education and health care settings in targeted central Oklahoma City neighborhoods. The following curricula will be implemented in elementary schools, middle schools, high schools, colleges, and health clinics: Making Proud Choices!, Making a Difference!, and Be Proud! Be Responsible. The health department aims to reach 4,700 young people per year.26

YOUTH SERVICES OF TULSA, INC., $1,499,600 (FY 2016)
Youth Services of Tulsa, Inc., (YST) is a non-profit, community agency focused on providing “innovative and proven programs focused on counseling, runaway and homeless youth, delinquency prevention, and youth development” for adolescents and young adults.27 Its services and programs include an adolescent emergency shelter, counseling, and a lesbian, gay, bisexual, transgender, and questioning (LGBTQ) support group. YST will partner with the Community Service Council to create the Tulsa Area Teen Pregnancy Prevention Collaborative and the Tulsa Campaign to Prevent Teen Pregnancy in order to administer the TPPP Tier 1B funds. The goal of the collaborative is to “collectively advance efforts to prevent teen pregnancy in Tulsa.”28 The Collaborative will provide the following five evidence-based programs in middle schools, high schools, alternative schools, juvenile detention centers, community-based settings, and clinics: CAS-Carrera, Making a Difference!, Making Proud Choices!, and Sexual Health and Adolescent Risk Prevention (SHARP). The Collaborative also plans to increase the number of referrals and the capacity of area providers to offer youth-friendly services to help more youth receive health care services. YST aims to reach 6,000 young people per year at first and grow to reach almost 10,000 young people per year by the end of the grant period.29

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 Oklahoma.

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

Tier 2C: Effectiveness of TPP programs designed specifically for young males.
   • In FY 2016, there were no TPPP Tier 2C grantees in Oklahoma.

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 Oklahoma State Department of Health received $643,470 in federal PREP funds.30
- There are two sub-grantees for the Oklahoma PREP state-grant program: Oklahoma City-County Health Department ($324,737) and the Tulsa City-County Health Department ($351,298).31

The Oklahoma State Department of Health Maternal and Child Health Service implements the state’s PREP grant program in collaboration with two sub-grantees to implement adolescent pregnancy prevention projects in school-based settings. The funded programs target at-risk African American, Native American, and Hispanic youth ages 10–19 in middle, high, and alternative schools in the Oklahoma City and Tulsa metropolitan statistical areas. Sub-grantees address the adulthood preparation topics of healthy relationships, adolescent development, and parent-child communication by using at least two of the following three curricula: Making a Difference, Making Proud Choices, and Power Through Choices. An estimated 3,300 young people are served annually.32 Additionally, the Tulsa Health Department uses the PREP sub-grant to fund a website that provides medically accurate and age appropriate sexual health information.33

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 Oklahoma.

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 Oklahoma.

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, Oklahoma received PREP state-grant funding; therefore, entities in Oklahoma 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 Oklahoma Department of Health received $998,103 in federal Title V AOUM funding.
- The department disburses sub-grants to three local entities. At the time of publication, additional information on Oklahoma’s sub-grantees, approved curricula, and match was unavailable.

The Oklahoma Department of Health, along with its three sub-grantees, administers Title V AOUM grant funds to programs that target elementary and middle school students and their parents. Sub-grantees will serve an estimated 2,425 young people and 376 parents a year in the following counties: Tulsa, Oklahoma, Comanche, Cleveland, Canadian, McClain, Grady, Pottawatomie, Rogers, Creek, Wagoner, Beckham, Custer, Washita, and Carter. One-on-one mentoring services will be provided to at-risk children ages 6-18 two to four times a month for two to three hours per visit. Sub-grantees will use *Choosing the Best!* and *Raising Healthy Children* curricula and *The Big Talk Book* for parents.

**“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 Oklahoma.

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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.
3 Ibid.
4 Okla. Stat. § 70-11103.3(C).
5 Okla. Stat. §§ 70-11103.3(D)–(E).
6 Okla. Stat. § 70-11103.3(B).
7 Okla. Stat. § 70-11103.3(C).
9 Okla. Stat. § 70-11105.1(B).
12 Ibid., Table 1.2.


16 Ibid., Table 1.2.


22 Ibid.

23 Ibid.


27 “About,” Youth Services of Tulsa, Inc., www.yst.org/about/.


29 Ibid.


32 Ibid.

33 Information provided by Amy Terry, Adolescent Health Coordinator, Oklahoma State Department of Health, May 3, 2016.

