Administration for Children and Families

Administration on Children, Youth and Families (ACYF)
Family and Youth Services Bureau (FYSB)

State Personal Responsibility Education Program (PREP)
HHS-2016-ACF-ACYF-PREP-1138

Due Date for FY 2016

February 29, 2016

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October 1, 2016

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DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

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Executive Summary:

The Administration for Families and Children (ACF), Administration on Children, Youth and Families' (ACYF) Family and Youth Services Bureau (FYSB) is accepting mandatory formula grant applications from states and territories for the development and implementation of the Personal Responsibility Education Program (PREP). This funding opportunity announcement sets forth the application requirements, the application process, and other administrative and fiscal requirements on how to apply for fiscal years (FY) 2016 and 2017 PREP funding.

I. PROGRAM DESCRIPTION

1. Statutory Authority

The Personal Responsibility Education Program (PREP) is authorized and funded by Section 513 of the Social Security Act (42 U.S.C. § 713). Section 2953 of the Patient Protection and Affordable Care Act of 2010 (Public Law (Pub. L.) No. 111-148) established PREP and funded it for FY 2010 through 2014. Section 206 of the Protecting Access to Medicare Act of 2014 (Pub. L. No. 113-93) extended that funding through FY 2015. Section 215 of the Medicare Access and CHIP Reauthorization Act of 2015 (Pub. L. No. 114-10) extended funding through FY 2017.

2. Purpose

The purpose of this program is to enable states to support PREP projects that replicate evidence-based, effective program models or substantially incorporate elements of effective programs that

have been proven, on the basis of scientific research, to change behavior, which means delaying sexual activity, increasing condom or contraceptive use for sexually active youth, reducing the number of partners, or reducing pregnancy among youth. The statute requires that a state application for the funds describe how it will use the funds to achieve its goals for reducing the pregnancy rates and birth rates for youth populations, especially youth populations that are the most high-risk or vulnerable for pregnancies or otherwise have special circumstances, including youth in foster care, homeless youth, youth with HIV/AIDS, pregnant youth who are under 21 years of age, mothers who are under 21 years of age, and youth residing in areas with high birth rates for youth. (Sec. 513(a)(3) (42) U.S.C. § 713(a)(3))

Youth who are faced with co-occurring conditions that increase their overall exposure to risks may be considered as meeting the "special circumstances" enumerated in the previous paragraph. The statute assigns priority to serving youth populations described as "the most high-risk or vulnerable for pregnancies or otherwise have special circumstances." The condition of co-occurrence means a youth who falls into two or more such categories at the same time. For example, a youth in foster care who also lives in a county with high teen birth rates presents two co-occurring conditions.

3. Background

PREP programs are designed to educate adolescents on both abstinence and contraception and to prevent pregnancy and sexually transmitted infections (STIs), including HIV/AIDS. Projects must incorporate at least three of six Adulthood Preparation Subjects (APS): healthy relationships, adolescent development, financial literacy, parent-child communication, educational and career success, and healthy life skills. PREP funding is directed toward the development of comprehensive, adolescent pregnancy prevention programs that incorporate medically accurate approaches, while replicating evidence-based programs or elements of programs that have been demonstrated to change behavior.

The overall objectives of PREP programs are derived from Congressional language that defines programming. The objectives of all PREP programs are to:

1. design and implement programs to educate adolescents on both abstinence and contraception to prevent adolescent pregnancy and STIs;
2. provide medically accurate, age-appropriate programming that is inclusive and culturally appropriate;
3. use best practices to replicate evidence-based effective programs or incorporate elements of effective programs that are proven to change behaviors (to include delaying sexual activity or increasing condom and contraceptive use) and promote successful healthy transitions to adulthood through the implementation of APS; and
4. target youth between the ages of 10 and 19 who are at high-risk for becoming pregnant or who face special circumstances, including living in or aging out of foster care, being homeless, living with HIV/AIDS, being pregnant or a mother under 21 years of age, or residing in an area with high teen birth rates.

States are strongly encouraged to consider how their plans may address youths who are at high-risk due to co-occurring conditions. These youth may require additional attention from grantees and selected providers.

Eligible states are the fifty United States, the District of Columbia, Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa, Northern Mariana Islands, the Federated States of Micronesia, the Marshall Islands, and Palau (referred to hereinafter as "states"). Under this announcement, an appropriation in the amount of $55,250,000 will be allotted to states to implement PREP. Individual state awards for each fiscal year shall be at least $250,000. States may only submit one request for funding and one state plan under this announcement. Approved state applications in FY 2016 are eligible for FY 2016 and FY 2017 funding.

In states where PREP awards will not be made in either FY 2016 or FY 2017, the sum of the unexpended annual state allotments for FY 2016 through FY 2020 will be used to award 3-year discretionary grants to local organizations and entities for the same purpose and in the same state. A separate funding opportunity announcement will be published regarding these discretionary grants in FY 2018.

Promoting Healthy Transitions to Adulthood Through Positive Youth Development

FYSB is committed to promoting the behavioral health and social and emotional well-being of vulnerable young people through a strengths-based, positive youth development (PYD) approach. States should address how they will use PYD principles in offering prevention programming that is trauma informed.

Historically, many programs concentrated on a specific problem behavior, like teen sexual activity, and involved narrowly focused interventions and educational activities for that problem. The increasing body of research on risk and protective factors, however, has highlighted the important roles that multiple aspects of young people's attitudes, behaviors, relationships, and environments have in predicting problem behaviors like early sexual activity. [1]

Moreover, at least two rigorous reviews of the evidence on teen pregnancy prevention programs indicate that particularly effective interventions are those that use multi-component youth development approaches serving high-risk populations.[2][3] This body of research indicates that programs need to address broader aspects of youths' social-emotional well-being in order to positively impact risky sexual behavior. In other words, PYD programs not only target early sexual activity, but they also target the risk and protective factors in young people's lives that are known to influence sexual activity. This evidence-based approach to well-being is part of a broader social-ecological model that encourages us to move beyond a focus on individual behavior and toward an understanding of the wide range of factors that influence health outcomes. This approach supports building collaboration beyond the adolescent sexual and reproductive health field in an intentional way. [4]

PYD is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families, in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young

people by providing multiple opportunities, fostering positive relationships, and furnishing the support needed to build their skills, sense of mastery, and leadership strengths. PYD programs promote a number of outcomes in youth, including social skills, emotional competence, positive relationships with peers and adults, and civic and school engagement. Typical elements of PYD program models include on-going structured activities that facilitate progressive skill building, positive interactions between youth and peers as well as adults, and high levels of youth participation and engagement. [5]

The Role of Trauma in Youth Prevention Programming

A PYD programming approach that works with vulnerable youth should take into account the trauma and mental health needs of many young people who have experienced maltreatment, abuse, or exposure to violence. Such an approach is described as trauma informed care (TIC). Childhood abuse, neglect, and exposure to other traumatic stressors, known as adverse childhood experiences (ACE), are common. The short- and long-term outcomes of these childhood exposures include a multitude of health and social problems, including early initiation of sexual activity and teen pregnancy.[6] These ACEs, in turn, have important implications for teen pregnancy.

Other groups may need support to address longstanding trauma like conditions described by Native Americans as "historical trauma." Historical trauma is the cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma. [7] An appropriate primary goal for providing Native youth with TIC services is to support their healing from the historical unresolved trauma that plagues many indigenous communities and individuals. In the absence of TIC interventions, the historical trauma and unresolved grief can become a barrier to youth making healthy decisions, which could lead to unplanned pregnancy, the spread of STIs, and unsuccessful transition to adulthood.

For youth with experiences of trauma, TIC can be viewed as a way to promote PYD-focused program planning and program delivery. TIC should take into account underlying skills, competencies, and attitudes that improve basic functioning across a range of life domains. Effective programming that supports mental health, development of coping strategies, and increased protective factors in a youth's life can minimize a young person's risk of problematic behavior and increase his or her capacity to thrive.

4. State PREP Plan Requirements

PREP programs should be designed to reduce pregnancy, STIs, and birth rates for youth populations, especially youth populations that are the most high-risk or vulnerable for pregnancies. PREP projects strive to achieve attitude and behavior changes that reduce birth and STI rates by:

- replicating evidence-based, effective program models;
- facilitating healthy transition to adulthood by addressing APS; and
- substantially incorporating elements of effective programs that have been proven on the basis of scientific research to change behavior.

Programs address change in behaviors associated with pregnancy or STIs, such as delaying sexual activity, increasing condom or contraceptive use, reducing the number of partners, and reducing pregnancy among youth. PREP funded efforts are dedicated to the development of comprehensive, culturally appropriate interventions and services that rely on the best available research to inform and guide practice.

i. Abstinence and Contraception

The program must include activities to educate youth on both abstinence and the use of contraception, and must place "substantial emphasis" on both abstinence and contraception for the prevention of pregnancy and STIs among youth. (42 U.S.C. § 713 (b)(2)(B)(iv)). The information and activities carried out under the program must be age appropriate and provided in the cultural context that is most appropriate for individuals in the targeted group.

ii. Evidence-Based and Effective Programs

The law states that Personal Responsibility Education Programs are required to "replicate evidence-based effective programs or substantially incorporate elements of effective programs that have been proven on the basis of rigorous scientific research to change behavior, which means delaying sexual activity, increasing condom or contraceptive use for sexually active youth, or reducing pregnancy among youth." (42 U.S.C. § 713 (b)(2)(B)(i)).

The U.S. Department of Health and Human Services (HHS) established, through a systematic review, a list of 37 program models that are considered evidence-based programs (EBPs) and have been found to be effective in preventing teen pregnancies or births, reducing STIs, or reducing rates of associated sexual risk behaviors (defined by sexual activity, contraceptive use, or number of partners). This list is available at: http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx. The website includes complete information regarding the process and criteria used for the review of pregnancy prevention programs, intervention implementation reports that provide descriptive information about each program model and its evaluation, and a database of all the studies that were considered in this review. States are not limited to the 37 models on the HHS website. Other models can be implemented that meet the requirement of being rigorously evaluated.

The programs in the systematic review vary in their structure, lessons, and content. Some programs may not adequately meet the PREP requirements to address abstinence and contraception education. Also, some providers may need to supplement their EBP lessons in order to address the three APS they choose. Grantees are not required to restrict providers to using HHS listed models. Grantees should be careful in selecting from the listed programs or among other models to ensure that they are addressing content requirements while they meet the needs of their target populations. Further, grantees should check with developers in order to clearly identify the essential or core components of the model programs they use. Grantees can avoid reducing the impact of core components of their interventions by thoroughly understanding their model's design.

ACF strongly encourages fidelity to the original EBP model or program elements. Fidelity is essential whether states (or their sub-awardees) are replicating an entire program or incorporating significant elements of EBPs into a program. When a full program model is being replicated with fidelity, adaptations to the program should generally be minimal, such as revising details in a role play, updating outdated statistics, adjusting reading and comprehension levels, making activities more interactive, or tailoring learning activities and instructional methods to youth participants' culture or development level. In some cases, more significant adaptations may be needed, such as adding components to address the additional adult preparation components of PREP or ensuring that programs adequately address both abstinence and contraception for the prevention of pregnancy and STIs.

iii. Adulthood Preparation Subjects (APS)

States are to combine sex education with programming designed to support youth's successful transition to adulthood. The mandated incorporation of APS supports preparation of youth for this transition through enhancements of the implementation of teen pregnancy and STI programming. Furthermore, the law requires that grantees and/or sub-awardees address at least three of the six adulthood preparation subjects so these program components are added in differing combinations. APS are defined as:

a) *Healthy relationships*, such as positive self-esteem and relationship dynamics, friendships, dating, romantic involvement, marriage, and family interactions.
b) *Adolescent development*, such as the development of healthy attitudes and values about adolescent growth and development, body image, racial and ethnic diversity, and other related subjects.
c) *Financial literacy*, such as budgeting, income, and financial planning.
d) *Parent-child communication*, such as strategies to increase parents' capacity to talk with their children about sexuality.
e) *Educational and career success*, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and work-place productivity.
f) *Healthy life skills*, such as goal-setting, decision-making, negotiation, communication and interpersonal skills, and stress management. (42 U.S.C. § 713(b)(2)(C)).

Programs should be tailored and should develop topics in appropriate ways to reflect the cultural, linguistic, and regional practices of the target population and the community they serve. Additional guidance on APS for PREP grantees is available on the FYSB website at: http://www.acf.hhs.gov/programs/fysb/content/programs/tpp/adult-prep-tip-sheet.pdf.

iv. Target Populations

State plans are required to enumerate populations they propose to serve. Grantees must serve youth populations that are the most high-risk or vulnerable for pregnancies or otherwise have special circumstances, including youth in or aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant youth who are under 21 years of age, mothers who are under 21 years of age, and youth residing in areas with relatively high teen birth rates compared to all youth within the state or territory. Under PREP authorizing legislation, state plans must be "based on data

from the Centers for Disease Control and Prevention National Center for Health Statistics, the most recent pregnancy rates for the state for youth ages 10 to 14 and youth ages 15 to 19 for which data are available, the most recent birth rates for such youth populations in the state for which data are available, and trends in those rates for the most recently preceding 5-year period for which such data are available." (42 U.S.C. § 713(a)(1)(C)(ii)).

FYSB recognizes additional youth populations that are the most high-risk or vulnerable for pregnancies or otherwise have special circumstances, including culturally underrepresented youth populations such as Hispanic, African-American, or Native American youth, systems-involved youth, rural youth, runaway/homeless youth, out of school youth, fathers who are under 21 years of age, and youth who are at risk of being or have been trafficked for commercial sexual exploitation.

States are further encouraged to fund providers who can adapt evidence-based models or elements of evidence-based models to address the unique needs of target populations. Adaptation, to the extent possible, should retain core elements of proven evidence-based or effective models.

All grantees must consider the needs of lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth and how their programs will be inclusive of and non-stigmatizing toward such participants. As states design their programs, ACF also encourages them to consider the needs of the families of origin of LGBTQ youths to be inclusive in considering the diversity of families served in PREP funded programs.

All funded programs must be welcoming and accessible to LGBTQ youth. State plans should ensure sub-awardees have in place or plan to have in place, within 30 days of grant award, policies prohibiting harassment based on race, sexual orientation, gender, gender identity (or expression), religion, and national origin. Funded programs must have a means to monitor protections and address bullying of any kind.

v. Fidelity and Adaptations

When a full program model is being replicated with fidelity, adaptations to the program should generally be minimal. States will monitor adaptations and develop a system for obtaining clearances and approvals with FYSB. Any component that is added onto an evidence-based program must be appropriately integrated into the evidence-based program model and should not alter the core components of the evidence-based program model. Frequently, agencies that distribute evidence-based curricula will offer guidance on their core components and address how to ensure fidelity. They may offer checklists or other tools to assist with implementation. If a grantee incorporates elements of effective programs, they must ensure that the elements selected meet the PREP requirements. These added elements must improve the likelihood that interventions will fit their target populations and have positive impacts on the targeted behaviors. FYSB has previously offered guidance to PREP grantees about selecting programs that fit and adapting programs. The guidance is available as full text downloads on the FYSB website. See "Selecting an Evidence-Based Program that Fits" at http://www.acf.hhs.gov/programs/fysb/content/programs/tpp/prep-program-fit-ts.pdf and

"Making Adaptations" at http://www.acf.hhs.gov/programs/fysb/content/programs/tpp/prep-making-adaptations-ts.pdf.

In addition, many PREP programming topics are discussed as tip sheets and supported by recorded webinars. For a full listing of available topics, states should visit: http://www.acf.hhs.gov/programs/fysb/programs/adolescent-pregnancy-prevention.

vi. Medical Accuracy and Age Appropriateness

Medically accurate and complete programs are verified or supported by the weight of research conducted in compliance with accepted scientific methods and published in peer-reviewed journals, where applicable, or comprised of information that professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete. (See 42 U.S.C. § 713(e)(2)).

The program(s) must provide medically accurate and up-to-date contraceptive information. Programs must provide age-appropriate information and activities. Topics, messages, and teaching methods must be suitable to specific age groups of youth based upon varying capacities of cognitive, emotional, and behavioral development.

vii. Access to Healthcare and Other Services

As appropriate, programs may provide teenage pregnancy prevention-related health care service referrals to other providers of health care services (*e.g.*, substance abuse, tobacco cessation, family planning, mental health issues, intimate partner violence), local public health and social service agencies, hospitals, voluntary agencies, and health or social services supported by other federal programs (*e.g*., Medicaid, State Children's Health Insurance Program (SCHIP), Temporary Assistance for Needy Families) or state/local programs. Programs should encourage the enrollment of eligible youth in public assistance programs such as Medicaid and SCHIP, or any other federal or state assistance program for which they may be eligible. While states may help youth find services they need and make referrals, such health services may not be paid for with PREP funds.

viii. Performance Measurement Data and Evaluation Options

ACF is engaged in a learning agenda to increase understanding of what works and why for PREP programs. The learning agenda activities will also provide valuable information to states on performance and outcomes that will facilitate continuous quality improvement. Activities include performance measure collection/reporting and, at the discretion of the state and local evaluation. If selected, states may be required to participate in a federal led evaluation.

Performance Measurement

All states and sub-awardees are required to monitor and report on program(s) implementation and outcomes through performance measures. Performance measures are intended for

monitoring purposes and to provide feedback about whether grantees are implementing programs as intended and seeing outcomes as expected.

In the first year of the program, HHS plans to revise the performance measures that were uniformly collected during the first two years of the State PREP Program across the first cohort of PREP grantees. (Data collection and reporting on these measures will require the Department to obtain approval under the Paperwork Reduction Act.) When performance measures are finalized, they will be distributed to grantees and funded recipients who will be required to report on these measures approximately twice a year. HHS will provide training on how to implement performance data collection and reporting.

Generally, there are five broad categories of performance measures that HHS anticipates all grantees will be required to track: (1) output measures (*e.g.*, number of youth served, hours of service delivery); (2) fidelity/adaptation; (3) implementation and capacity building (*e.g.*, community partnerships, competence in working with the identified population); (4) outcome measures (*e.g*., behavioral, knowledge, and intentions); and (5) community data (*e.g*., STI rates, birth rates).

States applying for funds must indicate their agreement to collect information related to the performance measures and report the data to HHS. States are encouraged to develop additional indicators of program performance.

Evaluation

States have the option to propose to conduct state grantee-specific evaluations, called "local evaluations," to answer one or more grantee-specific research questions of implementation sites. States that propose to conduct a local evaluation must ensure the evaluation:

- answers important questions of interest to the state;
- includes an appropriate evaluation design; and
- meets expectations of rigor that ACF provides through a system of technical assistance for those grantees and their local evaluators.

States may only propose one local evaluation. The research questions must drive the local evaluation, including its design, methods, data, and analyses. Examples of research topics may include:

- Adulthood Preparation Subjects, *e.g.*, the impact of adding specific skills-based programming related to APS;
- Populations, *e.g.*, describing the populations of adolescents reached and whether programming addresses the perceived needs of target populations; and
- Adaptations, *e.g.*, determining the differential outcomes or impacts of programming that adheres to standard curricula versus programming with significant adaptions.

Among these and other ACF approved topics, states may conduct implementation and/or impact studies on PREP implementation sites. Implementation studies are to document how PREP

programs are designed and implemented. Impact studies require an appropriate study design to assess the effectiveness of programming.

States are not required to propose local evaluations, and states' funding levels will not be affected if states propose or do not propose to conduct a local evaluation. States may propose to conduct an implementation and/or impact local evaluation. States should not undertake evaluative activities with PREP funds unless they adhere to overall guidance in this funding opportunity announcement and best practices consistent with technical assistance from ACF.

Any proposed local evaluation should be in addition to the planned delivery of pregnancy prevention services designed to serve participants and shall not replace programming by the state or its providers. The purpose of these local evaluations is to learn from programs in order to improve their implementation in the future and to rigorously examine the efficacy of curricula with the targeted population.

Local evaluations must be conducted by an independent evaluator, referred to as the "local evaluator." Local evaluators may be universities, research organizations, evaluation consultants, or other institutions with experience in conducting rigorous evaluations. While ACF will provide technical support for a small set of state grantees who propose rigorous local evaluations, the states will ultimately have oversight for the sub-awardee(s) that they choose to participate in the evaluation.

ACF is interested in supporting high quality, well designed local evaluations from which programs will learn and expand the evidence base, as well as help ACF learn more about what does and does not work at the state level. ACF will work in collaboration with states to disseminate information about the evaluation findings.

ACF will provide technical assistance and/or training to these states and their local evaluators on evaluation planning, evaluation implementation, analysis, reporting, and dissemination, in order to ensure maximum learning from these projects. ACF will review and provide suggestions to states to improve plans prior to the initiation of local evaluation activities. At the end of evaluations, states will be required to submit a final report to ACF.

ix. Maintenance of Effort

No payment of PREP funds shall be made to a state if the expenditure of non-federal funds by the state for activities, programs, or initiatives for which PREP funds are to support is less than the amount expended by the state for such activities, programs, or initiatives for FY 2016. (42 U.S.C. § 713(a)(5)).

x. Other Program Requirements

Travel to Meetings/Trainings and Promoting Sustainability

All grantees must budget annually the costs of sending one or two key staff persons to attend: 1) the three-day national PREP grantee meeting in the Washington, DC, area; and 2) at least one

two-day topical training meeting for PREP grantees or sub-awardees. The key staff in attendance at the annual meetings must be one of the lead program staff and/or must be integrally involved in the collection of data for local evaluation of PREP. Each meeting provides specific training for PREP Coordinators and important program requirement updates. Grantees may send more than two key staff persons to the national meeting.

xi. Definitions

Adaptation – The modification of an evidence-based program model that has been developed for a single, demographic, ethnic, linguistic, and/or cultural group for use with other groups.

Age-Appropriate – Topics, messages, and teaching methods that are suitable to particular ages or age groups of children and adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age or age group.

Capacity – The resources (i.e., staff, skills, facilities, finances, technology, partnerships Capabilities, and other resources) an organization possesses to implement a PREP program.

Core Components – Program characteristics that must be kept intact when an intervention is being replicated or adapted, in order for it to produce program outcomes similar to those demonstrated in the original evaluation research. It is the responsibility of the state and/or sub-awardee to consult directly with curriculum developers to determine the core components of the program model.

Effectiveness – The impact of a PREP program under conditions that are likely to occur in a real-world implementation.

Evidence-based Program Models – Program models for which systematic empirical research or evaluation has provided evidence of effectiveness. The listing of evidence-based programs that the Department has identified as having met the standards to be considered effective and eligible for funding for replication is available at the Assistant Secretary for Planning and Evaluation web page: http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx.

Fidelity – The degree to which an intervention is delivered as designed. Faithfulness with which a curriculum or program is implemented; that is, how well the program is implemented without compromising its core content that is essential for the program effectiveness.

Implementation – The process of introducing and using interventions in real-world service settings, including how interventions or programs are adopted, sustained, and taken to scale.

Medically Accurate and Complete – Verified or supported by the weight of research conducted in compliance with accepted scientific methods and published in peer-reviewed journals, where applicable; or comprising information that leading professional organizations and agencies with relevant expertise in the field recognized as accurate, objective, and complete.

Memorandum of Understanding – A written statement from a stakeholder

organization or individual describing a commitment, including possibly a financial role, in supporting the implementation of a program.

Objectives – The specific changes expected as a result of the program.

Operating Division – An operating division (OPDIV) is a HHS administrative unit led by an Assistant Secretary and reporting directly to the Secretary. ACF is one of 11 HHS operating divisions, including eight agencies in the U.S. Public Health Service and three human services agencies.

S.M.A.R.T. Objectives – Objectives that are Specific, Measurable, Achievable, Realistic and Time-framed.

Stakeholders – Individuals and organizations that have a shared interest in the program results. Stakeholders include participants, families, staff and volunteers, funders, and community organizations that share the program vision and are actively committed to the program through a Memorandum of Understanding (MOU).

State – Inclusive of the 50 states, District of Columbia, Puerto Rico, US Virgin Islands, Guam, American Samoa, Northern Mariana Islands, Federate States of Micronesia, the Marshall Islands, and Palau.

Training and Technical Assistance – The provision of advice, assistance, and/or training pertaining to the initiation, operation or implementation of the proposed program model.

Youth – Youth are defined as those who "attained age 10 but has not attained age 20" (42 U.S.C. § 713(e)(4)), except in the case of pregnant and parenting youth, which may include youth under 21 years old. (42 U.S.C. § 713(a)(1)(C)(iii)).

xii. Post Award Provisions

The acceptance of federal funds under this funding opportunity announcement will signify agreement by the grantee that it is prepared to operate under the following provisions:

- Have the project fully functioning as shown by selecting sub-awardees (where appropriate) and/or serving youth within at least 60 days following the Notice of Award for grant.
- Have provisions to formally train facilitators/educators (or certifying trainers if using Train-the-Trainer models) in the program model or elements of the program by professionals who can provide follow-up technical assistance.
- Budget annually the costs of sending two key staff persons to attend the 3-day national teen pregnancy prevention grantee conference in the greater Washington, DC, area, and at least one two-day topical meeting for PREP grantees. The key staff in attendance at the annual meetings must be one of the lead program staff and/or must be integrally involved in the collection of data for the national evaluation of PREP. Each meeting provides specific training for PREP Coordinators and important program

requirement updates. Grantees may send more than two key staff persons to the national meeting.

- Collect all of the federally developed PREP performance measures (grantee and all partners and subcontractors).
- Participate in research or evaluation activities and a technical assistance contract that relates to this funding opportunity announcement.

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[7]Packard, G. and Warshaw, C. (2013). Understanding the Impact of Trauma in Developing Teen Pregnancy Prevention Programs for Tribal Youth. Webinar, January 29, 2013. http://www.acf.hhs.gov/programs/fysb/resource/tribal-trauma-prep-20130129

II. AWARD INFORMATION

i. State Allocations

Each state shall be allotted a minimum of $250,000 or an amount determined by a formula calculated from and based on the target population. The formula for determining the allocation is to calculate the proportion of the number of youth between the ages of 10 and 19 of a state to the total number of youth between the ages of 10 and 19 in all of the states and territories, adjusted on a pro rata basis to account for states receiving the minimum $250,000 annual grant.

The computation of the proportion of eligible youth is based upon the most recent Bureau of Census data. If data are unavailable for a jurisdiction, the applicant will be eligible for the

minimum allocation of $250,000. See Appendix A for FY 2016 estimated allotments. Additionally, annual updates to the state allocation charts will be made available to awardees through FY 2020. Future awards are subject to the availability of funds.

ii. Allocation of Unexpended Appropriations

In the case that a state does not apply for PREP allocations in FY 2016 or in FY 2017, and funding remains available for PREP formula grants in subsequent years, the available allocations from those jurisdictions will be used to award 36-month discretionary grants to local organizations, which may include faith-based organizations, consortia, and entities in non-participating states. The discretionary awards will be made for up to 3-year project periods in fiscal years 2018, 2019, and 2020. Awards to organizations under the discretionary program will be for the express purpose of implementing PREP activities consistent with the requirements of the program in states that do not submit an application for an award in FY 2016 or in 2017.

iii. Approved Application Project Period

States may apply under this announcement to begin their project periods in FY 2016 or in FY 2017. All states must submit a plan in their initial year. States will not be required to submit full state plans after the initial funding year unless there are material changes made to their program. Instead, states will be required to submit written requests as a "letter of intent" to receive funding for each of the successive FY's allocations. ACF will provide states with guidance for submitting any updates to their applications.

iv. Sub-Awards

States may fund sub-awards with the PREP award. The method of selecting sub-awardees is governed by each state's regulations, policies, and/or legislation. There is no federal regulation or ACF policy that determines the type of sub-awardee agreement or selection process.

v. Funding Restrictions

Neither the state nor any of its sub-awardees may use federal or matching funds under this award to support inherently religious activities, including, but not limited to, religious instruction, worship, prayer, or proselytizing (45 CFR Part 87).

Funds may be used to cover costs of personnel, consultants, equipment, supplies, grant-related travel, and other grant-related costs. Funds may not be used for building alterations or renovations, construction, fundraising activities, political education or lobbying. Funds under this announcement cannot be used for the following purposes:

- To supplant or replace current public or private funding.
- To supplant ongoing or usual activities of any organization involved in the project.
- To purchase or improve land, or to purchase, construct, or make permanent improvements to any building.

- To reimburse pre-award costs. (Pre-award costs may include reimbursement for application development and submission efforts.).
- To support planning efforts and other activities associated with the development and submission of State Plans.

Funds must be used in a manner consistent with program requirements as outlined in this announcement. Allowable administrative functions/costs include:

- Usual and recognized overhead, including indirect rates for all consortium organizations that have a federally approved indirect cost rate; and
- Management and oversight of sub-awardees.

vi. Expenditure Period

States are eligible to apply for FY 2016 funding under this announcement. Each fiscal year's allocations will remain available for expenditure by the state through the end of the second succeeding fiscal year. For example, allocations awarded in FY 2016, through this announcement, would remain available for expenditure by the state until September 30, 2018 (with an additional 90 days allowed for liquidation). Allocations awarded in FY 2017 would remain available for expenditure until September 30, 2019 (with an additional 90 days allowed for liquidation). The final date for submitting applications for FY2016 is February 29, 2016.

III. ELIGIBILITY INFORMATION

i. Eligible Applicants

A total of 59 jurisdictions are eligible. Eligible entities include all 50 states, the District of Columbia, Puerto Rico, US Virgin Islands, Guam, American Samoa, Northern Mariana Islands, Federated States of Micronesia, the Marshall Islands, and Palau.

The authorized representative, established under state law, shall apply for and administer the Personal Responsibility Education Program. A signed letter from the authorized representative must accompany each application; it must include documentation or a citation establishing the authorized representative's authority to apply for and administer the Personal Responsibility Education grant program funds on behalf of the state.

ii. Additional Information on Eligibility

DUNS Number and System for Award Management Eligibility Requirements (SAM.gov)

All states must have a Data Universal Numbering System (DUNS) Number (http:// fedgov. dnb.com /webform) and an active registration with the Central Contractor Registry on the System for Award Management (SAM.gov, www.sam.gov). Obtaining a DUNS Number may take 1 to 2 days.

All states are required to maintain an active SAM registration until the application process is

complete. If a grant is awarded, registration at SAM.gov must be active throughout the life of the award.

Plan ahead. Allow at least 10 business days after you submit your registration for it to become active in SAM and at least an additional 24 hours before that registration information is available in other government systems, i.e., Grants.gov.

This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application through Grants.gov or prevent the award of a grant. States should maintain documentation (with dates) of your efforts to register for, or renew a registration, at SAM. User Guides are available under the "Help" tab at https://www.sam.gov.

HHS requires all entities that plan to apply for, and ultimately receive, federal grant funds from any HHS Agency, or receive sub-awards directly from recipients of those grant funds to:

- Be registered in the SAM prior to submitting an application or plan;
- Maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by an Operating Division (OPDIV); and
- Provide its active DUNS number in each application or plan it submits to the OPDIV.

ACF is prohibited from making an award until a state has complied with these requirements. At the time an award is ready to be made, if the intended recipient has not complied with these requirements, ACF:

- May determine that the state is not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

IV. APPLICATION AND SUBMISSION INFORMATION

1. Checklist

Submit all items in the order listed

1. Application for Federal Assistance SF-424M	4. State Plan Abstract
2. Letter from the Authorized Representative (Transmittal Letter)	5. Program Narrative
3. Table of Contents	6. Itemized Budget

2. Application Submission Requirements

On October 1, 2013, ACF implemented required electronic application submission of state and/or tribal plans via the Online Data Collection System (OLDC) for all mandatory grant programs. (See 78 FR 60285-60286, October 1, 2013). Mandatory grant recipients are required to use the OLDC to submit the Application for Federal Assistance SF-424 Mandatory Form (SF-424M) and upload all required documents. The form is available to applicants and grantees at http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html. ACF will not accept paper applications, or those submitted via email or facsimile, without a waiver.

Request an Exemption from Required Electronic Submission
ACF recognizes that some of the recipient community may have limited or no Internet access, and/or limited computer capacity, which may prohibit uploading large files to the Internet through the OLDC system. To accommodate such recipients, ACF is instituting an exemption procedure, on a case-by-case basis, that will allow such recipients to submit hard copy, paper state and tribal plans and reporting forms by the United States Postal Service, hand-delivery, recipient courier, overnight/express mail couriers, or other representatives of the recipient.

Additionally, on a case-by-case basis, we will consider requests to accept hard copy, paper submissions of state and tribal plans and reporting forms when circumstances such as natural disasters occur (floods, hurricanes, etc.); or when there are widespread disruptions of mail service; or in other rare cases that would prevent electronic submission of the documents. Recipients will be required to submit a written statement to ACF that the recipient qualifies for an exemption under one of these grounds: lack of Internet access; limited computer capacity that prevents the uploading of large files to the Internet; the occurrence of natural disasters (floods, hurricanes, etc.); when there are widespread disruptions of mail service; or in other rare cases that would prevent electronic submission of the documents.

Exemption requests will be reviewed and the recipient will be notified of a decision to approve or deny the request. Requests should state if the exemption is for submission of the SF-424M and state and/or tribal plan, Performance Progress Reports (PPR), or Federal Financial Reports (FFR). The written statement must be sent to the Program Office (for SF-424M and state and/or tribal plan, and PPR exemption requests) and/or ACF Grants Management Office (for FFR exemption requests) points of contact shown in *Section VI. Agency Contact* of this funding opportunity announcement. Requests must be received on or before the due date for applications listed in this funding opportunity announcement. Exemption requests may be submitted by regular mail or by email.

In all cases, the decision to allow an exemption to accept submission of hard copy, paper state plans and reporting forms will rest with the Program Office listed in this announcement and/or ACF's Office of Grants Management. Exemptions are applicable only to the federal fiscal year in which they are received and approved. If an exemption is necessary for a future federal fiscal year, a request must be submitted during each federal fiscal year for which an exemption is necessary.

Formatting Requirements for Paper Format Applications Only

All application materials must be submitted on 8 ½" x 11" white paper with 1-inch margins. All elements of the application submission must be in double-spaced format in 12-point Times New Roman or Courier font.

Forms, Assurances, and Certifications

Applicants seeking financial assistance under this announcement must submit the listed Standard Forms (SFs), assurances, and certifications. All required Standard Forms, assurances, and certifications are available at the Grants.gov Forms Repository.

3. State Plan Submission

The state plan is to be double spaced and to be formatted with subheadings as outlined in this section. Plans are to be submitted as indicated in the Application Checklist.

i. Standard Forms

Grantees are required to submit SF-424M Application for Federal Assistance. In the SF-424M, for the Catalog of Federal Domestic Assistance (CFDA) Number, enter 93.092.

- For the CFDA Title, enter "Personal Responsibility Education Program."
- For the estimated funding (box 18), make sure that all totals match those provided in the budget summary or any written narrative.

ii. Letter from the Authorized Representative (Transmittal Letter)

Include a signed transmittal letter from the administering agency's authorized representative that includes documentation or a citation of the authorized representative's authority to apply for and administer funds on behalf of the state.

iii. Table of Contents

Provide a table of contents that includes all applicable items listed in the post-award state plan checklist.

iv. State Plan Abstract

Applications will include a one-page abstract (no more than 500 words) of the State Plan. The abstract will provide an overview of the plan and will form the basis for the application summary in grants management documents. The abstract may also be distributed to provide information to the public and Congress and represents a high-level summary of the project. As a result, states must prepare a clear, accurate, concise abstract that can be understood without reference to other parts of the state plan and that provides a description of the proposed project, including: brief

statement of the project; whether it is for a local, county-wide or state-wide project; mechanism for delivering services (*e.g.*, sub-awards to local organizations through a competitive bid process); geographic area to be served (urban, rural, suburban); description of target population(s) to be served including any with special circumstances; a short description of the intervention(s) to be implemented including selected APSs; overarching goal(s); and monitoring strategies. The state should include the following information on the first page of the Project Abstract (this information is not included in the 500 word maximum):

- Project Title
- State Name
- Fiscal Year
- Grant Allocation Amount
- Address
- Contact Name
- Contact Phone Numbers (Voice, Fax)
- E-Mail Address and Web Site Address, if applicable

v. Program Narrative

The Program Narrative must contain a detailed description of the following:

Goal Statement, Objectives and Logic Models:

States are to submit goals, objectives and logic models for the program in their state Plans. States are required to develop:

(1) a program-specific goal(s) statement;
(2) up to six outcome objectives that clearly state expected results or benefits of the intervention proposed and link with the goal(s) statement, as well as multiple process objectives; and
(3) a logic model demonstrating how proposed inputs and activities will lead to the outcome objectives and ultimately the achievement of the goal(s) statement.

A goal is a general statement of what the state expects to accomplish. It should reflect the long-term desired impact of the project on its target group(s). Also, it should reflect the program goals contained in this Funding Opportunity Announcement. The state should outline the vision and short/long-term goals of the proposed program in the goal(s) statement. As appropriate, the goal(s) statement should mirror the outcomes found to be effective in the original evidence-based program model, and states and/or sub-awardees are encouraged to cite additional research that suggests the proposed approach for adapting their programs will have the greatest chance of success.

An objective is a statement which defines a measurable result that the program expects to accomplish. All proposed objectives should be specific, measurable, achievable, realistic, and time-framed (S.M.A.R.T.):

- Specific: An objective is to specify one major result directly related to the program goal, state who is going to be doing what, to whom, by how much, and in what time-frame. It must specify what will be accomplished and how the accomplishment will be measured.
- Measurable: An objective must be able to describe in realistic terms the expected results and specify how such results will be measured.
- Achievable: The accomplishment specified in the objective must be achievable within the proposed time line and as a direct result of program activities.
- Realistic: The objective must be reasonable in nature. The specified outcomes—i.e., expected results—must be described in realistic terms.
- Time-framed: An outcome objective must specify a target date or time frame for its accomplishments.

Outcome objectives—i.e., S.M.A.R.T. objectives related to the outcomes of the program – must be supported with several process objectives—i.e., S.M.A.R.T. objectives related to the processes or activities of the program.

States must submit a logic model for designing and managing their project. A logic model is a tool that presents the conceptual framework for a proposed project and explains the linkages among program elements. While there are many versions of the logic model, they generally summarize the logical connections among the needs that are the focus of the project, project goals and objectives, the target population, project inputs (resources), the proposed activities/processes/outputs directed toward the target population, the expected short- and long-term outcomes the initiative is designed to achieve, and the evaluation plan for measuring the extent to which proposed processes and outcomes actually occur. Appendix B contains greater detail about logic models and their construction.

Need Statement:

Identify the most recent statistical data, documentation of the incidence of teen births in the area to be served in relation to the geographic area to be served. Describe specifically how the project will benefit the target population. Other information is to be documented such as sexually transmitted infection rates; socio-economic conditions (disparities) including income levels; existing services; and unmet needs in the proposed service area. If the proposed population has unique challenges and barriers, these must be addressed.

The following items should be included in the need statement:

- The most recent birth rates among the same age groups based on data from the Centers for Disease Control and Prevention National Center for Health Statistics Data. Also, indicate the most recent pregnancy rates for the state for youth ages 10 to 14 and youth ages 15 to 19 and trends in those rates for the most recently preceding 5-year period for which data are available;
- State-established goals (or overall health objectives) for reducing the pregnancy rates and birth rates for youth populations; and
- A description of the state's plan to achieve such goals, especially among youth populations that are the most high-risk or vulnerable for pregnancies or otherwise have special

circumstances, including youth in or aging out of foster care, youth with HIV/AIDS, pregnant youth under 21 years of age and their partners, mothers under 21 years of age and their partners, and youth residing in areas with high teen birth rates

State plans must also address how they will target Native American youths in their targeted service areas. Efforts may include:

- Partnerships with organizations that have experience in providing Native youth with effective teen pregnancy prevention educational services;
- Plans to mitigate risk factors that lead to teen pregnancy and challenges to transition to adulthood among Native youth; and
- Referrals and access to culturally appropriate services that address the social and emotional issues faced by Native youth.

State plans are to address efforts to target vulnerable populations of youth with effective implementation strategies. Populations that may have co-occurring or overlapping conditions include youth in foster care, youth involved in the juvenile justice system, or runaway/homeless youth. Additionally, the state plan should address the coordination of PREP programming to youth receiving transitional living services through runaway and homeless youth programs and youth in foster care that are eligible for independent living services.

Target Populations:

States must provide realistic estimates of the overall number of program(s) participants and the number participating in the proposed project site(s). States must indicate how many participants are expected to participate in the 12 month project period, and break out the types of participants by age groups—specifically ages 10 to 14 and 15 to 19—and race and ethnicity. Plans should provide a detailed description of the most vulnerable targeted populations such as Native American, Latino and African American youth, youth in and aging out of foster care, runaway and homeless youths, and youth involved in the juvenile justice system.

Statistical data or other correlating variables may be used to substantiate the need to serve specific priority populations, i.e., those with special circumstances. These data may point to subpopulations of youths who present greater need among state and local populations. For example, Latino/Latina and Native American teens may have high teen birth rates within specific geographic pockets (counties, neighborhoods, zip codes, etc.) of some states that otherwise have lower rates of teen pregnancy or teen births. Additionally, older adolescents, 18-19 year olds, account for most teen pregnancies and are the most underserved in programs.

States must include a description of how they will ensure all youths will be eligible to participate in program services without regard to race, ethnicity, sexual orientation, or gender identity. State plans must identify how they will target LGBTQ youths. States should describe how their plan ensures that providers have policies and practices in place to protect youths from bullying and or harassment.

Program Management:

Describe how the state plans to govern and manage the execution of its overall program. Include the state's governance structure, roles/responsibilities, operating procedures, composition of committees, workgroups, teams and associated leaders, and communication plans that will provide adequate planning, monitoring, financial management, and control to the overall project.

The state organization is to demonstrate how it will effectively and efficiently carry out its project(s) across its targeted geographical catchment area(s).

The project management activities must provide details on how plans and decisions are developed and documented, issues/risks managed, and meetings facilitated. Describe mechanisms to ensure accountability across community participants and incremental progress in achieving milestones necessary for improvement. Describe how partnerships and mechanisms will be used to ensure financial and programmatic accountability. Plans that include partnerships designed to specifically address APS should describe the mechanisms in adequate detail.

Identify and describe how education, training, and monitoring processes will be used to maintain fidelity to the evidence-based program model(s). Provide a plan on how to address training when there is staff turnover.

Program Plan/Approach:

Describe the overall plan for the program. This plan shall state overall goals that address issues identified in the need statement. This program plan will include descriptions of the following:

- The range of mechanisms that will be used to deliver services and the actual services themselves (i.e., school-based programs, clinic-based programs, and/or youth development programs). The description should include information about how referrals will be made to other health services and programs, when appropriate.
- How states will monitor the fidelity of providers delivering programs. States must describe any systematic method they plan to employ to track and approve adaptations to EBPs. Each State PREP grantee plan should outline their process for reviewing and approving adaptations that have been requested by their sub-awardees or community partners.
- How states will assess the substantial emphasis of abstinence and contraception in program models for the prevention of pregnancy and STI.
- How states will assure that funded programs provide medically accurate and complete information
- The three adult preparation subjects that will be addressed and how the state will ensure they are addressed with sufficient adequacy and the metric(s) they will employ for this assessment. State plans should address minimum requirements for APS topics to be implemented by their PREP project. For example, states should:

    - Specify topics that will be covered to address at least three of the six mandated APS topics;
    - Indicate the minimum dosage of APS for each of the topics that will be implemented by PREP sites; and

    - Determine the resources and/or materials that will be used to implement the APS topics.

- Any criteria states deem appropriate in specifying how sub-awardees are directed to administer APS programming as part of funded PREP programs. All implementation sites must address APS.

- The entities and providers with which the state plans have formal arrangements and the types of services to be provided.
    - The target populations to be served.
    - The program model(s) to be implemented (or adaptations of evidence-based models) that will be medically accurate and complete and age appropriate. Include discussion on how the model(s) will meet the needs of and are tailored to the unique cultural and environmental needs of the identified target populations.
    - Lessons learned from previous projects of this type including how the experience helped develop the rationale for the proposed state approach.
    - As appropriate, how the project will be coordinated, integrated and linked to existing services within the service area. Address any other state plans health objectives as applicable.
    - How the applicant will provide or monitor the provision of teenage pregnancy prevention related health or social services or networks of referral. Applicants must also describe how the support activities and services will be provided to eligible youth.

Model(s) to be Replicated/Implementation Strategy:

The plan must describe the rationale for choosing the evidence-based model(s) proposed for replication or substantially incorporating elements of effective programs that have been proven on the basis of rigorous scientific research and how this approach is based upon the applicant's previous practice and community needs assessment.

Describe how the applicant will implement the intervention with fidelity and what, if any, minor adaptations are being proposed. If adaptations are proposed, include a justification or rationale for any proposed adaptations. The description must clearly relate to project(s) objectives and must address intensity of services.

If a state plans to operate a competitive or other similar sub-awarding process, the plan should describe the process by which the state will:

- ensure that sub-awardees replicate or substantially incorporate elements from EBPs that have been identified through the evidence review; or
- substantially incorporate elements of effective programs that have been proven effective on the basis of rigorous scientific research.

The plan must describe how the state will ensure that facilitators/educators who will deliver the program(s) have been or will be formally trained in the program model or elements of the

program model and this training is delivered by professionals who can provide follow-up technical assistance to facilitators.

Describe how the state will ensure that those who implement programs with this funding have access to implementation materials and training in the evidence-based intervention they seek to replicate or from which they will be incorporating elements. State may include plans to reach out to school administrators and/or state and local school boards.

Describe the planned adaptations that will be made and an explanation of why the adaptations do not unduly alter the core components of the evidence based program models or elements of those models. This explanation should discuss the reasons the adaptations are likely to augment, rather than diminish, program effectiveness. Or, if a state is going to sub-award funds, describe how states will ensure that adaptations proposed by sub-awardees do not unduly alter the core components of the evidence based program models.

Sub-Awardee Involvement:

Describe the process for sub-awardee involvement that includes efforts to: (1) publicize the availability of these funds; (2) encourage the involvement of new providers; (3) make clear the process, if any, for application and award of these funds; (4) provide proposal development assistance whenever possible, if requested by groups eligible for funding; and (5) provide this information on a timely basis.

Collaborations and Stakeholder Participation:

Describe how the state will develop official documents and a monitoring plan in such a way as to assure financial accountability and program(s) integrity to the proposed plan and the priorities of the state and of ACF. Potential partnerships may include, but are not limited to: state agencies who administer foster care, juvenile courts, health care providers and professional organizations, middle/high schools, school districts, community colleges, academic health centers, universities, and community groups.

State plans will be strengthened by the inclusion of credible stakeholder organizations. State plans are to include sub-awardee documents and/or clear descriptions of when the state will forward copies of formal partnerships, yet to be determined.

Performance Measurement:

Applicants are to describe their capacity to report on performance measures. Discuss how the applicant will track the five broad categories of performance measures, to include: (1) output measures (*e.g.*, number of youth served, hours of service delivery); (2) fidelity/adaptation; (3) implementation and capacity building (*e.g.*, community partnerships, competence in working with the identified population); (4) outcome measures *(e.g.*, behavioral, knowledge, and intentions); and (5) community data (*e.g.*, STI rates, birth rates, etc.). Applicants must affirm their commitment to collecting performance measurement data.

Evaluation:

Applicants must clearly state their understanding that all states and sub-awardees will be required to participate, if selected for national evaluation(s). Plans must discuss the grantees' willingness to participate if selected and authorized representatives will affirm this understanding in their plan. Grantees who are proposing local evaluations should describe eligibility factors for choosing among those universities, research organizations, evaluation consultants, or other institutions that they may solicit. The plan should address how states will exercise oversight for the local evaluation.

vi. Itemized Budget Narrative/Justification

The budget narrative must thoroughly describe how the proposed categorical costs are derived. Discuss the necessity, reasonableness, and allocability of the proposed costs. For in-kind contributions, the source of the contribution and how the valuation of that contribution was determined must also be described. All applicants must outline proposed costs that support all project activities in the Budget Narrative/Justification. Applicants are to document budgeting for staff attendance to a national and regional meeting under the travel cost category.

The application must include the allowable activities that will take place during the funding period and outline the estimated costs that will be used specifically in support of the program. Costs are not allowed to be expended until the start date listed in the Notice of Grant Award. Whether direct or indirect, all costs must be allowable, allocable, reasonable, and necessary under the new applicable uniform administrative, cost principles, and audit requirements for HHS awards. Awards issued under this announcement are subject to 45 CFR Part 75 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. The Code of Federal Regulations is available at www.gpo.gov. Any fees as program income must be used toward the goals and objectives of the project.

vii. Assurances

Applicants will make the appropriate certification of their compliance with all federal statutes and regulations relating to nondiscrimination.

viii. Certification Regarding Lobbying

Applicants must furnish a Certification Regarding Lobbying with their application. Submission is required for all applicants prior to award.

If applicable, recipients under the announcement must provide a copy of the SF-LLL disclosure form, which must be completed by the reporting entity, whether sub-awardee or prime federal recipient, at the initiation or receipt of a covered federal action, or a material change to a previous filing, pursuant to title 31 U.S.C. § 1352.

ix. Disclosure of Lobbying Activities (SF-LLL)

If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the applicant shall complete and submit the SF-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Applicants must furnish an executed copy of the Certification Regarding Lobbying prior to award.

Forms/Certifications	Description	Available at
SF-424M (Mandatory Form)	This is a required Standard Form. Application for Federal Assistance - Mandatory	http://www.grants.gov/web/grants/forms.html
Certification Regarding Lobbying	Required of all applicants at the time of their application. and must be submitted prior to the award of the grant.	http://www.grants.gov/web/grants/forms.html
SF-LLL - Disclosure of Lobbying Activities	If any funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the applicant shall complete and submit the SF-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Applicants must furnish an executed copy of the Certification Regarding Lobbying prior to award.	http://www.grants.gov/web/grants/forms.html

x. Additional Assurances and Certifications

Performance Measures Assurance

Applicants must include a written statement that specifically includes a commitment to document, store, and report on performance using the full set of uniform measures to be provided by ACF.

Federally led Evaluation Assurance

If a federally led evaluation of PREP is conducted, states could be asked to participate. Participation in a federal, national evaluation can provide the states with a national spotlight, giving them the opportunity to tell their story to a broad group of teen pregnancy prevention stakeholders. Their study can inform the field regarding the positive outcomes effective teen pregnancy prevention programs can have on various populations of youth. If selected for a future federal evaluation, a grantee must participate. States must include a written assurance in their application that they understand this requirement.

States must include a clear, written statement that specifically includes:

- A commitment to accept and fully participate in all aspects of the federal evaluation if they are selected, and adhere to all evaluation protocols established by ACF and conducted by its designee contractors;
- A confirmation of the applicant's understanding that:
    - the federal government may incorporate the local evaluation into the federally led evaluation;
    - the federal government may waive the local evaluation requirement; or
    - the local evaluation may continue in parallel to the federal evaluation they join; and
- A commitment to ensure that partnering organizations comply with the federal evaluation award condition.

Paperwork Reduction Disclaimer

As required by the Paperwork Reduction Act, 44 U.S.C. §§ 3501-3520, the public reporting burden for the project description is estimated to average 24 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. The Project Description information collection is approved under the Office of Management and Budget (OMB) control number 0970-0380, which expires January 31, 2017. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Funding Restrictions

The Consolidated Appropriations Act, 2016, (Title VII, General Provisions – Government-Wide), limits the salary amount that may be awarded and charged to ACF grants and cooperative

agreements. Award funds issued under this announcement may not be used to pay the salary, or any percentage of salary, to an individual at a rate in excess of Executive Level II. The Executive Level II salary of the "Rates of Pay for the Executive Schedule" is $185,100. This amount reflects an individual's base salary exclusive of fringe benefits and any income that an individual may be permitted to earn outside of the duties of the applicant organization. This salary limitation also applies to sub-awards/subcontracts under an ACF mandatory and discretionary grant.

V. AWARD ADMINISTRATION INFORMATION

Administrative and National Policy Requirements

For the terms and conditions that apply to all mandatory grants, as well as ACF program-specific terms and conditions go to: http://www.acf.hhs.gov/grants/mandatory-formula-block-and-entitlement-grants.

Reporting

All program and financial reporting forms for mandatory grant programs must be submitted electronically via the OLDC as required by 78 FR 60285-60286, October 1, 2013. Please see *Section IV. APPLICATION AND SUBMISSION INFORMATION* for more information on required electronic submission, as well as exemption from this requirement.

Performance Progress Reports (PPR)

ACYF grantees must submit Performance Progress Reports (PPR) using the standardized forms in Appendix C. The PPR's use is approved under OMB Control Number 0970-0380. This approval expires January 31, 2017. The averaged burden hours per PPR response is 16.

A PPR must be filed with ACF/FYSB describing the activities carried out, and include an assessment of the effectiveness of those activities in achieving the purposes of the grant. A section of this PPR must be completed by each grantee or sub-awardee that performed the direct services contemplated in the application certifying performance of such services. Consortia grantees are to compile performance reports into a comprehensive report for submission. The PPRs are due semi-annually, 30 days after the conclusion of the reporting period.

PPRs will be submitted to the PREP Office Contact listed *in Section VI. Agency Contacts*. Failure to submit reports on time may be a basis for withholding grant funds, suspension, or termination of the grant. In addition, all funds reported after the obligation period will be recouped.

Federal Financial Reports (FFR)

Versions of the SF-425 form in Adobe PDF and MS-Excel formats, along with instructions, are available at: http://www.whitehouse.gov/omb/grants_forms.

In addition, a separate, quarterly financial report is required by the Division of Payment Management using the SF-425. The Division of Payment Management's online Payment Management System is required for filing quarterly reports and is found at the following address: https://www.dpm.psc.gov. For further assistance, please call the HHS helpline at 877-614-5533.

Other Award Information

Continuation Awards - Prior to FY 2017, ACF will send guidance to state grantees on submitting any updates to their State Plans.

FFATA Sub-award and Executive Compensation

Awards issued as a result of this funding opportunity may be subject to the Transparency Act sub-award and executive compensation reporting requirements of 2 C.F.R. Part 170. See ACF's **Award Term for Federal Financial Accountability and Transparency Act (FFATA) Subaward and Executive Compensation Reporting Requirement** implementing this requirement and additional award applicability information.

ACF has implemented the use of the SF-428 *Tangible Property Report* and the SF-429 *Real Property Status Report* for all grantees. Both standard forms are available at: www.whitehouse.gov/omb/grants_forms/.

VI. AGENCY CONTACTS

Personal Responsibility Education Program Office Contact

Marc D. Clark
Administration for Children and Families
Administration on Children, Youth and Families
Family and Youth Services Bureau
330 C Street, SW
Washington, DC 20201
Tel: 202-205-8496
Fax: 202-260-9345
E-mail: marc.clark@acf.hhs.gov

Personal Responsibility Education Grants Management Office Contact

Manolo Salgueiro
Administration for Children and Families
Division of Mandatory Grants
Office of Grants Management
330 C Street, SW
Washington, DC 20201
Attn: Personal Responsibility Education Program
Washington, DC
Tel: 202-690-5811

Fax: 202-401-5644
E-mail: manolo.salgueiro@acf.hhs.gov

Appendices

Appendix A – Estimated State Allotments for FY 2016 and 2017
Appendix B – Sample Logic Model Format
Appendix C – Performance Progress Report Cover Page and Program Indicators Forms and Instructions

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APPENDIX A: State Allocations for FY 2016 and Estimated Allocations for 2017

No	State	2016 Allocation	2017 Estimated Allocation
1	Alabama	782,092	782,092
2	Alaska	250,000	250,000
3	Arizona	1,127,843	1,127,843
4	Arkansas	486,466	486,466
5	California	6,369,420	6,369,420
6	Colorado	862,007	862,007
7	Connecticut	596,295	596,295
8	Delaware	250,000	250,000
9	District of Columbia	250,000	250,000
10	Florida	2,856,722	2,856,722
11	Georgia	1,738,914	1,738,914
12	Hawaii	250,000	250,000
13	Idaho	293,401	293,401
14	Illinois	2,119,733	2,119,733
15	Indiana	1,120,034	1,120,034
16	Iowa	514,313	514,313
17	Kansas	495,699	495,699
18	Kentucky	702,361	702,361
19	Louisiana	751,761	751,761
20	Maine	250,000	250,000
21	Maryland	944,604	944,604
22	Massachusetts	1,057,983	1,057,983
23	Michigan	1,633,922	1,633,922
24	Minnesota	884,189	884,189
25	Mississippi	509,676	509,676
26	Missouri	973,624	973,624
27	Montana	250,000	250,000
28	Nebraska	317,533	317,533
29	Nevada	448,745	448,745
30	New Hampshire	250,000	250,000

No	State	2016 Allocation	2017 Estimated Allocation
31	New Jersey	1,423,244	1,423,244
32	New Mexico	343,985	343,985
33	New York	3,013,637	3,013,637
34	North Carolina	1,613,898	1,613,898
35	North Dakota	250,000	250,000
36	Ohio	1,890,738	1,890,738
37	Oklahoma	643,470	643,470
38	Oregon	599,531	599,531
39	Pennsylvania	1,983,637	1,983,637
40	Rhode Island	250,000	250,000
41	South Carolina	761,044	761,044
42	South Dakota	250,000	250,000
43	Tennessee	1,041,136	1,041,136
44	Texas	4,818,514	4,818,514
45	Utah	588,238	588,238
46	Vermont	250,000	250,000
47	Virginia	1,310,280	1,310,280
48	Washington	1,086,419	1,086,419
49	West Virginia	270,284	270,284
50	Wisconsin	932,364	932,364
51	Wyoming	250,000	250,000
52	American Samoa	250,000	250,000
53	Micronesia, Federated States of	250,000	250,000
54	Guam	250,000	250,000
55	Marshall Islands, Republic of the	250,000	250,000
56	Northern Mariana Islands	250,000	250,000
57	Palau, Republic of	250,000	250,000
58	Puerto Rico	592,244	592,244
59	Virgin Islands	250,000	250,000
	Total	**55,250,000**	**55,250,000**

APPENDIX B:

Logic Models and Resources for Developing Programs and Logic Models

A logic model is a diagram that shows the relationship between the program components and activities and desired process and outcome objectives. It is a visual way to present and share understanding of the relationships among the resources available to implement the proposed intervention, the strategies/activities planned for implementation, and the outputs and outcomes expected. The outputs are often expressed as S.M.A.R.T. process objectives. All states and/or sub-awardees must create logic models that provide an overview of the entire program for the duration in which it is expected to occur. The logic models must detail how inputs (*e.g.*, resources) will be used to fund activities for the achievement of specific process and outcome objectives enumerated and ultimately the achievement of the goal(s) statement.

The following is an overview on the construction of logic models. The goal of a logic model is to provide a systematic and visual way to show the connection between program resources, activities, and expected results. States and/or sub-awardees are encouraged to submit program logic models that include the following aspects:

1) Challenges Faced by the Program
    a. Specific items a program wants to address.
    b. Example: High rates of teen pregnancy among a specific population.
2) Inputs of the Program
    a. Resources necessary to accomplish goals.
    b. Example: Funding allocated towards a pregnancy prevention program, through a grant program, or in-kind resources.
3) Processes/Activities
    a. The specific actions supported by the inputs.
    b. Example: Meetings, classes.
4) Outputs
    a. The products of the activities.
    b. Example: The number of students completing a program.
5) Outcomes
    a. Expected changes as a result of the program. These can be divided into immediate, intermediate (e.g., annual), and long term (*e.g.*, 5-8 years).
    b. Example: (Annual) Increased consistent condom usage among a specific population; (Long-Term) Decreased rates of teen pregnancy.

In addition, states are encouraged to address the following four areas in the construction of their logic model: demographics (*e.g.*, age, race, sex), external factors which may influence the program's success (*e.g.*, economic situation), the constraints faced by the program (*e.g.*, negotiations with stakeholders; loss of non-federal resources), and the assumptions being made in the adoption of a specific program *(e.g.,* what is believed about the method of intervention that cannot be tested; what is believed about the target population that cannot be tested).

Resources for Developing Programs and Logic Models

A potential resource for identifying and creating relevant programs geared toward outcomes is the Center for Disease Control and Prevention's *10 Steps to Promoting Science-Based Approaches (PSBA) to Teen Pregnancy Prevention using Getting to Outcomes (GTO)* (see http://www.cdc.gov/reproductivehealth/adolescentreprohealth/PDF/LittlePSBA-GTO.pdf). This guide provides a clear 10-step process to assessing the needs of a community, selecting a program, implementing it, and tracking progress. States and sub-awardees are encouraged to review these steps in developing their approaches and their logic models.

Another helpful resource is the publication entitled *Tools to Assess the Characteristics of Effective Sex and STD/HIV Education Program*. This document uses past research to identify 17 characteristics that are associated with pregnancy prevention programs' success. States and sub-awardees are encouraged to consider these 17 characteristics in developing their programs and their logic models.

APPENDIX C:

Performance Progress Report Cover Page and Program Indicators Forms and Instructions

OMB Control No: 0970-0380
Expiration Date: 01/31/2017

PERFORMANCE PROGRESS REPORT
COVER PAGE
PERSONAL RESPONSIBILITY EDUCATION PROGRAM

		Page	of Pages
1.Federal Agency and Organization Element to Which Report is Submitted	2. Federal Grant Number	3a. DUNS	
		3b. EIN	

4. Recipient Organization (Name and complete address including zip code)			5. Recipient Identifying Number or Account Number
6. Project/Grant Period		7. Reporting Period End Date	8. Final Report? ☐ Yes ☐ No
Start Date: *(Month, Day, Year)*	End Date: *(Month, Day, Year)*	*(Month, Day, Year)*	9. Report Frequency ☐ *annual* ☐ *semi-annual* ☐ *quarterly* ☐ *other* *(If other, describe: _____ _____)*
10. Performance Narrative			
11. Other Attachments *(attach other documents as needed or as instructed by the awarding Federal Agency)*			
12. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purposes set forth in the award documents.			
12a. Typed or Printed Name and Title of Authorized Certifying Official		12c. Telephone *(area code, number and extension)*	
		12d. Email Address	
12b. Signature of Authorized Certifying Official		12e. Date Report Submitted *(Month, Day, Year)*	
		13. Agency use only	

PERFORMANCE PROGRESS REPORT
COVER PAGE
PERSONAL RESPONSIBILITY EDUCATION PROGRAM
INSTRUCTIONS

Item	Data Elements	Instructions
1.	**Awarding Federal agency and Organizational Element to Which Report is Submitted**	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub-agency within an awarding Federal agency.
2.	**Federal Grant or Other Identifying Number Assigned by the awarding Federal agency**	Enter the grant/award number contained in the award document.
3a.	**DUNS Number**	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b.	**EIN**	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4.	**Recipient Organization**	Enter the name of recipient organization and address, including zip code.
5.	**Recipient Account Number or Account Number**	Enter the account number or any other identifying number assigned by the recipient to the award. This number is strictly for the recipient's use only and is not required by the awarding Federal agency.
6.	**Project/Grant Period**	Indicate the project/grant period established in the award document during which Federal sponsorship begins and ends. Note: Some agencies award multi-year grants for a project/grant period *(e.g.,* 5 years) that are funded in increments known as budget periods or funding periods. These are typically annual increments. Please enter the project/grant period, not the budget period or funding period.
7.	**Reporting Period End Date**	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter reporting period end dates shall be used: 3/31; 6/30; 9/30; and or 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
8.	**Final Report**	Mark appropriate box. Check “yes” only if this is the final report for the project/grant period specified in Box 6.
9.	**Report or Frequency**	Select the appropriate term corresponding to the requirements contained in the award document. “Other” may be used when more frequent reporting is required for high-risk grantees, as specified in OMB Circular A-110.

Item	Data Elements	Instructions
10.	**Performance Narrative**	**Leave blank and complete Form PREP Program Indicators**
11.	**Other Attachments**	Attach other documents as needed or as instructed by the awarding Federal agency.

OMB Control No: 0970-0380
Expiration Date: 01/31/2017

PERFORMANCE PROGRESS REPORT
PROGRAM INDICATORS
PERSONAL RESPONSIBILITY EDUCATION PROGRAM (PREP)

			Page	of Pages
1.Federal Agency and Organization Element to Which Report is Submitted	2. Federal Grant Number	3a. DUNS		4. Reporting Period End Date *(MM/DD/YYYY)*
		3b. EIN		

Program Indicators			
(1) Item	**(2) Activity Description**	**(3) Indicator**	**(4) Explanation**
B-01	**Major activities and accomplishments during this period**		
B-02	**Describe any challenges related to the areas addressed in item B-01**		
B-03	**Significant Observations**		
B-04	**Organizational Issues**		
B-05	**Technical assistance and Training**		
B-06	**Activities planned for next reporting period**		

PERFORMANCE PROGRESS REPORT
PROGRAM INDICATORS
PERSONAL RESPONSIBILITY EDUCATION PROGRAM (PREP)
INSTRUCTIONS

Schedule

Submit the original progress report to the Office of Grants Management, Division of Mandatory Grants, and a copy to the Program Office. Reports are due 30 days after the end of the second and fourth quarter of the budget period (every 6 months).

A FINAL PROGRAM REPORT IS DUE 90 DAYS AFTER THE PROJECT PERIOD END DATE.

Item	Data Elements	Instructions
1	**Awarding Federal agency and Organizational Element to Which Report is Submitted**	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is a sub-agency within an awarding Federal agency.
2	**Federal Grant or Other Identifying Number Assigned by the awarding Federal agency**	Enter the grant/award number contained in the award document.
3a	**DUNS Number**	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b	**EIN**	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4	**Reporting Period End Date**	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter reporting period end dates shall be used: 3/31; 6/30; 9/30 and or 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
Program Indicators		
B-01(4)	**Major activities and accomplishments during this period**	Recommend use of project task charts from approved grant application and/or project work plan with this section. Describe any draft/final products related to the project.
B-02(4)	**Challenges**	Describe any deviations or departures from the original project plan including actual/anticipated slippage in task completion dates, and special problems encountered or expected. Use this report section to advise Project Officer and Grants Management Specialist of resolution or actions taken to resolve the challenges presented during the reporting period.
B-03(4)	**Significant observations**	List the type and number of services accessed by target population, the number of youth serviced in each community and other relevant project data
B-04(4)	**Organizational Issues**	Briefly describe any organizational (i.e. staffing and personnel, policy and procedures) and planning team issues that affected the management of the grant during the reporting period.

B-05(4)	**Technical Assistance and Training**	Describe any issues, functions, or processes that your organization needs addressed through technical assistance, training, national conferences or on-site visits.
B-06(4)	**Activities planned for next reporting period**	Briefly describe.