

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

**DECLARATION OF MEG SULLIVAN,
MD, MPH**

DECLARATION OF MEG SULLIVAN, MD, MPH

I, Meg Sullivan, MD, MPH, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.
2. I am the Deputy Secretary for Public Health Services for the Maryland Department of Health. While I have only been in this role for a short time, I have nearly 20 years of experience across public health, human services, and healthcare service delivery. I am a Board certified pediatrician with a Medical Doctorate (M.D.) degree from the University of California, San Diego School of Medicine and a Master of Public Health (MPH) from the Johns Hopkins Bloomberg School of Public Health in Baltimore, Maryland.
3. In my role as Deputy Secretary for Public Health Services, I oversee the Public Health Services Administration, and specifically the Prevention and Health Promotion Administration (PHPA). The Prevention and Health Promotion Administration includes the Office of Family and Community Health Services (OFCHS) in the Maternal and Child Health Bureau, where the PREP program is administered.
4. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive). I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have

reviewed information gathered from the Maryland Department of Health's records by others within the organization.

5. In Maryland, our Department of Health supports comprehensive, evidence-based educational programming among eight local health departments and two universities, including the University of Maryland Eastern Shore, a Historically Black University, to reduce pregnancy and HIV and other sexually transmitted infections (STIs) among youth. Collectively, subrecipient local health departments implement PREP programs in two school districts and through eight community-based organizations. Across the State, it is estimated that 1,405 youth completed evidence-based programs provided through PREP funding. PREP programs serve as a catalyst for broader community health as they engage parents, caregivers, and other trusted adults in skill-building workshops and parent-child connectedness activities highlighting the needs of Maryland youth.

6. In applying for PREP grants, the Maryland Department of Health has complied with the program's application requirements, which include assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and targeted towards high-risk youth. The programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" as described in 42 U.S.C. § 713(b)(2)(C). In its grant applications, the Maryland Department of Health also addresses how Maryland uses positive youth development principles when offering trauma-informed prevention programming. The Maryland Department of Health last provided certification to ACF of Maryland's compliance with these requirements on November 25, 2024. That certification is attached as Exhibit A.

Federal Funding Relied on by the Maryland Department of Health

7. In 2010, Maryland submitted a PREP grant application in response to ACF's Funding Opportunity Announcement (FOA). Since that time, Maryland has submitted a letter of intent packet to re-authorize PREP grants each year. ACF extends funding to grantees for three-year grant terms. Maryland applies for a new grant each year, resulting in overlapping awards. Maryland has received these funds since August 2, 2010.

8. ACF has issued to the Maryland Department of Health three currently active awards covering the period from October 1, 2022, through September 30, 2027. For the period from October 1, 2022 through September 30, 2025, ACF provided \$878,170 in PREP funding to Maryland. For the period from October 1, 2023 through September 30, 2026, ACF provided \$936,723 in PREP funding to Maryland. For the period from October 1, 2024 through September 30, 2027, ACF provided \$946,130 in PREP funding to Maryland. The Maryland Department of Health is currently operating using fiscal year 2023 funds and has not yet drawn down funds awarded for 2024 or 2025.

9. ACF disburses PREP funding as reimbursements requested by the Maryland Department of Health. The Maryland Department of Health expects to request its next grant disbursement on or around December 2025. Reimbursable expenses are accrued throughout the year, and the Maryland Department of Health is presently awaiting the disbursement of funds from ACF for previously submitted requests.

10. Maryland's PREP subrecipient local health departments have well-established partnerships with schools, faith-based organizations, non-profits, group homes, and after school programs in order to address local adolescent health needs through science-based education and

personal responsibility. Communities are empowered to select the settings and partnerships that are best positioned to reach Maryland youth.

Communications from Federal Government

11. On or about April 14, 2025, the Maryland Department of Health received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that ACF was performing a "medical accuracy review" and requesting submission of "any current curricula and programmatic materials" related to state PREP grants. FYSB stated that the "purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete." That letter is attached as Exhibit B.

12. As requested, the Maryland Department of Health submitted all PREP curricula and materials on April 17, 2025 for medical accuracy review. This included instructor manuals, lesson plans, student workbooks, handouts, and video links.

13. On August 6, 2025, the Maryland Department of Health received a Notice of Award (NOA) describing the financial information associated with Maryland's PREP grant award funds. The NOA states, "[t]he use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions." In the Remarks section, the NOA states, "Recipients are prohibited from including gender ideology in any program or service that is funded with this award." The Terms and Conditions section states, in part, "[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory

authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.” The NOA is attached as Exhibit C.

14. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards and award modifications that add funding. The Supplemental T&Cs prohibit grant recipients from including so-called “gender ideology” in PREP-funded programs and services. Per ACF’s notice, these Supplemental T&Cs are effective immediately.

15. Per the August 6, 2025 NOA and the Supplemental T&Cs, the “gender ideology” terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. The Maryland Department of Health has not used any funds awarded under the August 6, 2025, NOA and thus has not accepted the “gender ideology” term in the NOA or the Supplemental T&Cs.

16. On August 26, 2025, the Maryland Department of Health received via email a second letter from ACF (the PREP Directive) stating that Maryland’s current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified” because Maryland’s curriculum and materials include “gender ideology.” The identified content, ACF claims, is “outside of the scope of PREP’s authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials.” ACF further instructs Maryland “**to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.**” ACF asserts that it may take “additional enforcement action,” and lists as

possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.” That letter is attached as Exhibit D.

Harms to Maryland

17. Maryland is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency’s ability to plan for the future is severely negatively impacted as this uncertainty erodes trust with longstanding community partners and the youth they serve.

18. Further, the threat to our state’s federal financial assistance for failure to remove content concerning “gender ideology” puts at risk \$946,130.

19. The impact of a disruption in funds would be devastating to the Maryland Department of Health’s ability to reach youth. Based on the program’s historical use of grant funds, without the continued and uninterrupted funding of PREP grants, the Maryland Department of Health and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in Maryland, especially high-risk youth, will suffer.

20. The review of Maryland’s Personal Responsibility Education Program (PREP) for medical accuracy cited two of our curricula in use as “outside of the scope of authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant.” While Maryland makes no specific allocations associated with “gender ideology,” subrecipients design and implement programs reflective of the experience of

participants. Program implementation in Washington and Prince George’s Counties are addressing statutory requirements:

- 42 U.S.C § 713(b)(2)(B)(vi): The information and activities carried out under the program are provided in the cultural context that is most appropriate for individuals in the particular population group to which they are directed
- 42 U.S.C. § 713(b)(2)(C)(ii): 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.

The review for medical accuracy discounts the programs’ efforts to comply with the statutory requirement to address the lived experience of participants, their “cultural context”, and the “other related [Adulthood Preparation] subjects.”

Specific harms beyond diversion of funds from direct youth engagement include modifying current programming to be less responsive to youth experience in Washington and Prince George’s Counties, reducing the desirability of participation. Modifying programs to not reflect local youth experience will reduce engagement and hamper statutorily required messaging regarding *delaying sexual activity, increasing condom or contraceptive use for sexually active youth, or reducing pregnancy among youth.*

In Prince George’s County in particular, this modification will decrease community discourse around healthy sexual behaviors. Prince George’s County was recognized in 2019 by the Trump Administration’s Ending the HIV Epidemic Initiative as one of the 57 jurisdictions in the United States and territories with the highest HIV disease burden. In this majority-minority jurisdiction, PREP is implemented by a community-based organization who holds sessions in a local public library. An innovative program that utilizes social media influencers with a

significant community presence, modifying the program to explicitly disregard the *cultural context that is most appropriate for individuals in the particular population group* will discredit the authenticity, reach, and impact of the programming. The jurisdiction will lose a vital community responsive approach that promotes healthy relationships and adulthood preparation far beyond the program participants in dialogue with their local community.

21. The Maryland Department of Health must follow the laws of Maryland. To comply with the NOA, Supplemental T&Cs, and the PREP Directive, the Maryland Department of Health would be forced to violate Maryland's comprehensive sexual health education laws, including:

- COMAR 13A.04.18.01 D(2)(a): “Maryland family life and human sexuality instruction shall represent all students regardless of ability, sexual orientation, gender identity, and gender expression.”
- COMAR 13A.04.18.01E: “ Curriculum Documents. Consistent with Education Article, §§2-205(h), 4-111.2, 7-205.2, 7-401, 7-410, 7-411, 7-411.1, 7-413, 7-439, and 7-445, Annotated Code of Maryland, each local school system shall provide comprehensive health education curriculum documents for the elementary and secondary schools under its jurisdiction that: (1) Include the standards set forth in §C of this regulation; and (2) Are aligned with the State Framework, as developed by the Maryland State Department of Education in collaboration with the local school systems.”

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 25, 2025, in Baltimore City, Maryland

A handwritten signature in black ink, appearing to read "Meg Sullivan", is positioned above a horizontal line.

Meg Sullivan, MD, MPH

Exhibit A

Application SF-424M**Program Name:** Personal Responsibility Education Program**Grantee Name:** MARYLAND DEPARTMENT OF HEALTH**Report Name:** Application SF-424M**Report Period:** 10/01/2025 to 09/30/2026**Report Status:** Submitted

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Administration for Children and Families		Form Approved Control No: 4040-0020 Expires: 02/08/2026 Version 01.2	
APPLICATION FOR FEDERAL ASSISTANCE SF - 424 - MANDATORY			
* 1.a. Type of Submission: <input type="radio"/> Plan <input checked="" type="radio"/> Funding Request	* 1.b. Frequency: <input checked="" type="radio"/> Annual <input type="radio"/> Other * Other (Specify)	* 1.c. Consolidated Application/ Plan/Funding Request? Explanation:	* 1.d. Version: <input checked="" type="radio"/> Initial <input type="radio"/> Resubmission <input type="radio"/> Revision <input type="radio"/> Update
		2. Date Received:	State Use Only:
		3. Applicant Identifier:	
		4a. Federal Entity Identifier:	
		4b. Federal Award Identifier:	5. Date Received By State:
			6. State Application Identifier:
7. APPLICANT INFORMATION			
* a. Legal Name: MARYLAND DEPARTMENT OF HEALTH			
* b. Employer/ Taxpayer Identification Number (EIN/TIN):	1526002033A9		* c. Organizational UEI: J5L2LBJK8RB8
* d. Address:			
* Street 1:	201 W Preston Street, 5th Floor		Street 2:
* City:	BALTIMORE		County: BALTIMORE CITY
* State:	MD		Province:
* Country:	United States		* Zip / Postal Code: 21201 - 2391
e. Organizational Unit:			
Department Name:		Division Name:	
f. Name and contact information of person to be contacted on matters involving this application:			
Prefix:	* First Name: Brianna	Middle Name:	* Last Name: Dekka
Suffix:	Title: Adolescent Sexual and Reproductive Health Manager	Organizational Affiliation:	
* Telephone Number: (443) 931-0558	Fax Number:	* Email: brianna.deka@maryland.gov	
* 8a. TYPE OF APPLICANT: A: State Government			
b. Additional Description:			
* 9. Name of Federal Agency: Administration for Children and Families, Family and Youth Services Bureau			


	Catalog of Federal Domestic Assistance Number:	CFDA Title:	
10. CFDA Numbers and Titles 1	93.092	Personal Responsibility Education Program	
11. Descriptive Title of Applicant's Project			
12. Areas Affected by Funding:			
13. CONGRESSIONAL DISTRICTS OF:			
* a. Applicant 07		b. Program/Project:	
Attach an additional list of Program/Project Congressional Districts if needed.			
14. FUNDING PERIOD:		15. ESTIMATED FUNDING:	
a. Start Date: 09/30/2026	b. End Date: 10/01/2025	* a. Federal (\$): \$0	b. Match (\$): \$0
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?			
a. This submission was made available to the State under the Executive Order 12372			
Process for Review on :			
b. Program is subject to E.O. 12372 but has not been selected by State for review.			
c. Program is not covered by E.O. 12372.			
* 17. Is The Applicant Delinquent On Any Federal Debt?			
<input type="radio"/> YES <input checked="" type="radio"/> NO			
Explanation:			
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)			
**I Agree <input checked="" type="checkbox"/>			
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.			
18a. Typed or Printed Name and Title of Authorized Certifying Official Brianna Deka		18c. Telephone (area code, number and extension)	
		18d. Email Address brianna.deka@maryland.gov	
18b. Signature of Authorized Certifying Official 		18e. Date Report Submitted (Month, Day, Year) 11/25/2024	
Attach supporting documents as specified in agency instructions.			

Exhibit B



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Shelly Choo
Maryland Department of Health and Mental Hygiene
201 West Preston Street
Baltimore, MD, 21201

RE: State Personal Responsibility Education Program 1601MDPREP

Dear Shelly Choo:

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual
 - Handouts

- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit C



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501MDPREP
FAIN# 2501MDPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

MARYLAND DEPARTMENT OF HEALTH
201 W Preston Street, 5th Floor

BALTIMORE, MARYLAND 21201 2391

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1526002033A9

5. Data Universal Numbering System (DUNS)

143148679

6. Recipient's Unique Entity Identifier

J5L2LBJK8RB8

7. Project Director or Principal Investigator

Samantha Ritter

Director

Samantha.Ritter@maryland.gov

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information

11. Award Number

2501MDPREP

12. Unique Federal Award Identification Number (FAIN)

2501MDPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$594,876.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$946,130.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501MDPREP
FAIN# 2501MDPREP
Federal Award Date: August 6, 2025

Recipient Information

MARYLAND DEPARTMENT OF HEALTH
201 W Preston Street, 5th Floor
BALTIMORE, MARYLAND 21201 2391

Employer Identification Number (EIN): 1526002033A9

Data Universal Numbering System (DUNS): 143148679

Recipient's Unique Entity Identifier: J5L2LBJK8RB8

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>		<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>			
75-X-1512	2025,G99SU25	\$946,130.00	\$594,876.00	\$946,130.00		2501MDPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit D



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, DC 20201 | www.acf.hhs.gov

Tuesday, August 26, 2025

Shelly Choo, Director
Maryland Department of Health and Mental Hygiene
201 West Preston Street, 5th Floor
Baltimore, MD 21201

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (#2301MDPREP), 2024 (#2401MDPREP), and 2025 (#2501MDPREP).

Dear Maryland Department of Health and Mental Hygiene:

On April 14, 2025, the Administration for Children and Families (ACF) requested that Maryland provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing Maryland's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from Maryland's PREP curricula and program materials:¹

¹ ACF initiated a medical accuracy review to determine if Maryland's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, Maryland will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

Rights, Respect, Responsibility, Lesson Plan (Updated 2023)

- Pages 8, 19, 26, 32, 57, & 78: “A NOTE ABOUT LANGUAGE: Language is really important and we’ve intentionally been very careful about our language throughout this curriculum. You may notice language throughout the curriculum that seems less familiar- using the pronoun ‘they’ instead of ‘her’ or ‘him,’ using gender neutral names in scenarios and role-plays and referring to ‘someone with a vulva’ vs. a girl or woman. This is intended to make the curriculum inclusive of all genders and gender identities. You will need to determine for yourself how much and how often you can do this in your own school and classroom and should make adjustments accordingly.”
- Pages 39-40 (bolded content denotes gender ideology): “Sexual Orientation: Myth or Fact? You can change your BEHAVIORS, **you can change your IDENTITY** – but you can’t change your ORIENTATION, or how you feel. Feelings of attraction are discovered, not chosen. It isn’t something a person can turn on and off like a light switch. We don’t choose who we are attracted to. Now, sometimes we can discover new feelings of attraction – **for example, always being attracted to one gender, and then finding someone or others of a different gender attractive later in life.** That is different from sitting down and trying to change the way you feel – or from going to therapy or to church to try to influence your feelings. It doesn’t work, and can end up doing real psychological and emotional harm.”
- Power Point, page 44 (bolded content denotes gender ideology): “What is ‘Sexual Orientation’?
 - **The gender(s) of the people to whom we are attracted, physically and romantically.**
 - **Can include more than one gender.**
 - Includes love: can know one’s orientation without necessarily doing something sexual with another person.”
- Power Point, page 46 (bolded content denotes gender ideology):
 - “Orientation–Who we’re attracted to
 - Behavior–How we behave sexually
 - **Identity–What we call ourselves”**

Making Proud Choices, 5th Edition, Facilitator’s Guide

- Page 36 (Module 1, Activity B Procedure: “Facilitator’s Note: Asking participants to tell you their pronouns is a way of creating a safe space for transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns and thus “outing” themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or

zir. Pronouns don't always line up with what observers might expect based on a person's perceived biological sex. The simple act of requesting pronouns sends the message that transgender and gender nonconforming youth are welcome and respected in the group."

Pages 39-40 (Activity C Procedure): "**Respect diversity:** Let's keep in mind that there's diversity in society and in the group. Individuals come from different family backgrounds, different racial and cultural groups and different living situations. Some young people have already had romantic relationships; others aren't even thinking about it. Some have had sexual intercourse. Some have had sex because they choose to; other's may have had sex against their will. Some may identify as gay, lesbian, bisexual or straight. Some may identify as male, female or transgender.

Young people may express themselves in ways that don't conform with their biological sex. There are many ways that youth can express their gender identity. .
..

Define terms related to diversity as needed.

I want to be sure everyone understands some of the terms we use when talking about diversity.

Gender refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel. Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another.

Gender identity is peoples' inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn't fit these labels. It may be the same as (cisgender) or different from(transgender)the sex they were assigned at birth. Gender identity is unique for each person.

Gender expression is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics."

The "purpose" of a PREP grant award is for states to "carry out personal responsibility education programs consistent with this subsection." 42 U.S.C. § 713(b)(1). The statute defines PREP as "a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C)." 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects

described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency's authority to administer the program consistent with the authorizing legislation as enacted by Congress.

Maryland's current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs Maryland to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ Maryland is directed to remove these and all similar language throughout their curricula and program materials. Should Maryland fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).


Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60)

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: "(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management."

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Chéri Thompson at Cheri.Thompson@acf.hhs.gov.

days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,

A handwritten signature in cursive script, reading "Andrew K. Gradison".

Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF WILLIAM BELL

DECLARATION OF WILLIAM BELL

I, **William Bell**, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of the Commonwealth of Massachusetts. I am over the age of 18, and I am competent to testify to the matters herein.

2. I am the Chief Financial Officer and Senior Associate Commissioner at the Massachusetts Department of Elementary and Secondary Education (DESE). DESE is responsible for overseeing all public elementary and secondary education and public adult education in Massachusetts. DESE works in partnership with stakeholders to improve public education in the State and to raise achievement in accordance with state and federal mandates.

3. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs); and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive).

4. I am familiar with the information in the statements set forth below either through personal knowledge, consultation with DESE staff, or from my review of relevant documents and information.

5. DESE receives PREP funding through annual contracts with the Massachusetts Department of Public Health (DPH). Pursuant to such contracts, which take the form of

“interagency services agreements” between DESE and DPH, DESE administers a competitive grant program through which it provides grants to school districts in Massachusetts.

6. Through its work in administering the PREP grant program, DESE assists school districts in providing comprehensive, evidence-based educational programming to reduce, among teenagers and youth, pregnancy, HIV, and sexually transmitted infections (STIs). In addition to providing funding to school districts through the issuance of PREP grants, DESE also provides technical assistance to the school districts that receive such grants, including through training and professional development of teachers and staff who implement the educational programming funded with the PREP grants that DESE awards.

7. DESE administers the PREP grant program through a competitive grant process that outlines the purpose of PREP grants, eligibility criteria, and requirements governing grantees’ use of PREP grant funding from DESE. DESE then reviews proposals submitted by Massachusetts school districts seeking PREP grants funding, determining whether the proposals satisfy applicable criteria, and DESE then awards PREP grants to districts that satisfy the criteria; typically, DESE issues such PREP grants to approximately 8-10 school districts each year. In the past few years, DESE has been able to meet 100% of the demand for grant funding sought by school districts. Depending on the year, the amount awarded to each school district ranges between \$10,000 and \$40,000. For fiscal year 2026, for example, DESE received a total of \$200,000 in PREP funding from DPH, and DESE has reviewed and is ready to approve grant awards of \$25,000 to each of 8 school districts that have applied for PREP grants in this fiscal year.

8. Massachusetts school districts use PREP grant funds awarded by DESE to implement high-quality, medically-accurate sex education to students, including providing training for teachers who provide the educational programming. Use of PREP grants may take the

form of stipends to support teachers' selection of curriculum materials, engagement with families, or planning and evaluation with respect to implementation of the selected curriculum.

9. In connection with the PREP grants that it awards to school districts, DESE provides districts with the option of choosing from one of three different approved curricula and programming materials, entitled "Making Proud Choices," "Rights, Respect, Responsibilities," and "Get Real."

10. The three different curricula and programming materials approved by DESE for use by school districts are all evidence-based, medically-accurate, and age appropriate. The approved programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" described in 42 U.S.C. § 713(b)(2)(C). Districts may use some of the PREP grant funds to send teachers to training offered on the approved curricula and to offer coaching to teachers on implementing evidence-based, medically-accurate sex education.

Harms to DESE

11. DESE is currently experiencing harm and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and the PREP Directive have created confusion and put at risk \$200,000 that DESE has reviewed and is waiting to award to districts for fiscal year 2026.

12. For over 15 years, PREP funding has been a primary source of funding for DESE to support Massachusetts school districts in providing sex education.

13. Loss of PREP funding will make it more difficult for DESE to support Massachusetts school districts in providing age-appropriate and medically accurate education to

youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. Youth in Massachusetts, especially high-risk youth, will suffer.

14. PREP has been a primary source (and one of the few sources) of grant funding for educational programming concerning prevention of teen pregnancy and STIs in Massachusetts schools in communities with high rates of teen pregnancy and STIs. Loss of PREP grant funding for such schools will make it more difficult for them to provide this critical educational programming.

I declare under the penalty of perjury that to the best of my knowledge, the foregoing is true and correct.

Executed on September 24, 2025, at Traverse City, Michigan.



WILLIAM BELL
Senior Associate Commissioner
Chief Financial Officer
Massachusetts Department of Elementary and Secondary Education

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF RUTH BLODGETT

**DECLARATION OF RUTH BLODGETT, MASSACHUSETTS DEPARTMENT OF
PUBLIC HEALTH**

I, RUTH BLODGETT, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of Massachusetts. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Director of the Bureau of Community Health and Prevention, at the Massachusetts Department of Public Health, and I have over 35 years of experience in healthcare and public health.

3. This declaration is on behalf of a program serving adolescents run by the Bureau of Community Health and Prevention.

4. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive). I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from the Department of Public Health's records by others within the organization.

5. In Massachusetts, our Department of Public Health uses PREP funding to directly support comprehensive, evidence-based educational programming to reduce pregnancy, HIV and other sexually transmitted infections (STIs), and birth rates for youth at four community-based organizations. The Department of Public Health also provides PREP funding to the

Massachusetts Department of Elementary and Secondary Education (DESE), which uses the funding to support that same type of programming at three school districts. The programs funded directly and indirectly by the Department of Public Health serves 854 youth across the State.

6. In applying for PREP grants, the Department of Public Health has complied with the program's application requirements, which include assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and targeted towards high-risk youth. The programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" as described in 42 U.S.C. § 713(b)(2)(C). In its PREP grant applications, the Department of Public Health also addresses how Massachusetts uses positive youth development principles when offering trauma-informed prevention programming. The Department of Public Health last provided certification to ACF of Massachusetts' compliance with these requirements on February 26, 2016. That certification was included in the full Notice of Award response that is attached as Exhibit 1.

Federal Funding Relied on by the Department of Public Health

7. In August 2010, Massachusetts submitted a PREP grant application in response to ACF's Funding Opportunity Announcement (FOA) HHS-2010-ACF-ACYF-PREP-0125, followed by a post-award state plan in February 2011. Since that time, Massachusetts has submitted a letter of intent packet to re-authorize PREP grants each year. Massachusetts also submitted an updated post-award state plan in November 2024. ACF extends funding to grantees for three-year grant terms. Massachusetts applies for a new grant each year, resulting in overlapping awards. Massachusetts has received PREP funds since 2009.

8. More specifically, ACF has issued to the Department of Public Health three currently active awards covering the period from October 1, 2022, through September 30, 2027.

For the period from October 1, 2022 through September 30, 2025, ACF provided \$973,307 in PREP funding to Massachusetts. For the period from October 1, 2023 through September 30, 2026, ACF provided \$1,038,205 in PREP funding to Massachusetts. For the period from October 1, 2024 through September 30, 2027, ACF provided \$1,004,945 in PREP funding to Massachusetts. The Department of Public Health is currently operating using fiscal year 2023 and fiscal year 2024 funds and has not yet drawn down 2025 funds.

9. ACF disburses PREP funding as reimbursements are requested by the Department of Public Health.

10. Massachusetts has well-established partnerships with school districts and local organizations to administer these PREP funds. Since October 1, 2016, the Department of Public Health has partnered with Family Services of the Merrimack Valley, Family and Children's Services of Greater Lynn, Citizens for Citizens, and Gandara Mental Health Center. During school year 2024-2025, the Department of Elementary and Secondary Education partnered with public school districts in Chicopee, Haverhill, and Lawrence. These partnerships with school districts and local organizations are intended to design and implement programming to achieve attitude and behavior changes that reduce teen birth and sexually transmitted infection (STI) rates through medically-accurate programming on both abstinence and contraception.

Communications from Federal Government

11. On or about April 14, 2025, the Department of Public Health received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that ACF was performing a "medical accuracy review" and requesting submission of "any current curricula and programmatic materials" related to state PREP grants. FYSB stated that the "purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete."

That letter is attached as Exhibit 2.

12. As requested, the Department of Public Health submitted all PREP curricula and materials on April 18, 2025. This included facilitator manuals for two evidence-based curricula (Making Proud Choices and Rights, Respect, and Responsibility), supplemental materials delivered alongside these curricula to ensure comprehensive content, and a curriculum developed by the Department of Public Health (Valuing Our Insights for Civic Engagement).

13. On August 6, 2025, the Department of Public Health received a Notice of Award (NOA) describing the financial information associated with Massachusetts' PREP grant award funds. The NOA states, "[t]he use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions." In the Remarks section, the NOA states, "Recipients are prohibited from including gender ideology in any program or service that is funded with this award." The Terms and Conditions section states, in part, "[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405." The NOA is attached as Exhibit 3.

14. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards and award modifications that add funding. The Supplemental T&Cs prohibit grant recipients from including so-called "gender ideology" in PREP-funded programs and services. Per ACF's notice, these Supplemental T&Cs are effective immediately.

15. Per the August 6, 2025 NOA and the Supplemental T&Cs, the "gender ideology" terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. The Department of Public Health has not used any funds awarded under the August 6, 2025, NOA and thus has not accepted the "gender ideology" term in the NOA or the Supplemental T&Cs.

16. On August 26, 2025, the Department of Public Health received via email another letter from ACF stating that Massachusetts' "current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified" because Massachusetts' curriculum and materials include "gender ideology." The identified content, ACF claims, is "outside of the scope of PREP's authorizing statute... and all references to it must be removed from [the] PREP curricula and program materials." ACF further instructs Massachusetts "to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter." ACF asserts that it may take "additional enforcement action," and lists as possibilities "allowing HHS to withhold, disallow, suspend, or terminate Federal awards." That letter is attached as Exhibit 4 (the PREP Directive).

Harms to Massachusetts

17. Massachusetts is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency's ability to plan for the future is severely negatively impacted. For example, our PREP grant covers the salary of 1.3 full-time employees (FTEs) at the Department of Public Health. With the uncertainty of the PREP grant's continuation past October 27, 2025, our agency must consider whether and how to maintain these valuable positions. Also, because part of the PREP award is

shared with Massachusetts' Department of Elementary and Secondary Education, the confusion also impacts this second state agency, interfering with the timing of the release of funding availability to school districts.

18. Further, the threat to our state's federal financial assistance for failure to remove content concerning "gender ideology" puts at risk \$2,362,936. This represents the total of available funding on all three grants that has not yet been drawn down.

19. The impact of a disruption in funds would be devastating to the program. Given my experience, without the continued and uninterrupted funding of PREP grants, the Department of Public Health and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in Massachusetts, especially high-risk youth, will suffer.

20. Massachusetts is committed to delivering high-quality sexuality education that meets the needs of youth across the state. To support this goal, the Department of Public Health and outside vendors collaborated on a recent evaluation of adolescent sexuality education programming, including PREP programming. This evaluation found that students were interested in receiving more content on gender and gender identity in their sexuality education programs. Compliance with the NOA, Supplemental T&Cs, and PREP Directive would therefore lower the quality of the Department of Public Health's sexuality education program and result in student disengagement in this important content. In addition, while loss of PREP funding will result in more than 850 youth losing access to comprehensive sexuality education, it will also have impacts on schools and community-based organizations that are funded to do this work. Without PREP funding, educator positions at funded organizations may lose some or all of their financial support and staff may be at risk of lay-offs. Because many of these staff deliver multiple types

of programming, the impact on youth development programming and other types of health and physical education will be broader than the delivery of PREP-funded sexuality education programming.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 22, 2025, Boston, Massachusetts.



Ruth P. Blodgett

Director of the Bureau of Community Health and
Prevention Massachusetts Depart of Public Health

Exhibit 1

Massachusetts Department of Public Health Personal Responsibility Education Program (PREP)

Fiscal Year 2017

FOA Number: HHS-2016-ACF-ACYF-PREP-1138

CFDA Number: 93.092

Submitted By: Eileen M. Sullivan

Date Submitted: February 26, 2016

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State Plan Abstract

Project Title: Massachusetts Department of Public Health Personal Responsibility Education Program

State Name: Massachusetts

Fiscal Year: 2017

Grant Allocation Amount: \$1,057,983

Address: 250 Washington Street, 5th Floor Boston, MA 02108

Contact Name: Jill Clark

Contact Phone Numbers: (v) 617 624.6067 (f) 617 624.6062

E-Mail Address and Web Site Address: Jill.Clark@state.ma.us, www.mass.gov/dph

The Massachusetts Department of Public Health (MDPH) will expand on our successes managing and coordinating a statewide PREP program aimed at decreasing the teen birth rate and STI rates among high-risk target populations in priority communities. The program is comprised of community-based organizations (CBOs) working in community settings and the Massachusetts Department of Elementary and Secondary Education (MDESE) working with low performing schools in communities with high teen birth rates or high STI rates. In both settings, PREP funding will support the delivery of medically-accurate, age-appropriate teen pregnancy and STI prevention programming.

Through a competitive procurement process, MDPH will award contracts to CBOs serving priority communities that MDPH identified through a statewide needs assessment as having the highest teen birth rates, highest STI rates in youth, and/or the highest number of youth at risk. Within these communities, specific target populations include Hispanic/Latino youth, African-American youth, LGBTQ youth, expectant and parenting teens under 21 years old, youth in or aging out of foster care and/or youth with physical and/or intellectual disabilities. To serve one or more of these target populations effectively, applicant agencies must identify one of the seven evidence-based curricula identified by MDPH that aligns with the state's program goals and reaches high-risk youth in priority communities. Agencies must also incorporate the following adulthood preparation subjects into their pregnancy and STI prevention programming: healthy relationships, adolescent development, and financial literacy.

In addition to CBOs, MDPH will fund MDESE to award grants to school districts in communities with low-performing schools and high teen birth rates to implement their curriculum *It PaYs: Partners for Youth Success*, based on Making Proud Choices!, which incorporates the three adulthood preparation subjects listed above. MDESE has successfully adapted and integrated this program into schools over the past five years. Through this intensive, coordinated effort MDPH anticipates providing evidence-based education and teen pregnancy and STI prevention programming to a minimum of 2,500 youth annually.

MDPH's PREP Coordinator will partner with key staff from MDESE to provide essential technical assistance and coordinate trainings for partner organizations to assure that evidence-based curricula are implemented with fidelity. The PREP Coordinator will monitor providers' performance measures and outcomes through fidelity logs that mirror each evidence-based curricula to assure adherence and to identify areas for improvement and/or adaptation.

MDPH has demonstrated the capacity to manage an effective statewide PREP program in partnership with qualified community providers and MDESE. Using well-established procurement, contracting, and monitoring processes, MDPH will support providers to reach Massachusetts' most vulnerable and at-risk youth to reduce the teen birth rate and STI rates in multiple communities across the state.

Program Narrative

The Massachusetts Department of Public Health (MDPH) is pleased to apply for Personal Responsibility Education Program (PREP) funding through the Administration for Children and Families. Massachusetts' PREP program is housed within MDPH's Sexual and Reproductive Health Program (SRHP) within the Division of Health Access. Key principles that guide the work of the SRHP and the PREP program include evidence-based practice, positive youth development, trauma-informed care, and a commitment to health equity and racial justice. These principles underlie the program's commitment to serving the youth of Massachusetts and inform the Department's approach to working with this population through PREP programming.

Goal Statement, Objectives, and Logic Model

The goals of the MDPH PREP program are to:

- Decrease the teen birth rate among key target populations in priority Massachusetts communities through increased access to evidence-based education; and
- Decrease STI incidence among target populations in priority communities through increased access to medically-accurate, age-appropriate programming.

The PREP program aims to achieve outcome and process objectives to influence these goals.

Outcome Objectives

1. At program completion, 90% of youth completing PREP programming will report they intend to use a method of contraception and/or condom or barrier method all or most of the time
2. At program completion, 75% of sexually active youth completing PREP programming will report that they used a birth control method and/or condom or barrier method at last sexual intercourse
3. At program completion, 80% of youth completing PREP programming will report they have a teacher or adult to talk to about their problems

4. At program completion, 90% of youth completing PREP programming will know where to access family planning services in their community

Process Objectives

1. By the end of Year 1 and ongoing thereafter, a minimum of 20 staff across all funded agencies are trained and able to implement evidence-based teen pregnancy prevention programming with high-risk youth.
2. The PREP program will serve 2,500 youth annually statewide (in both school and community-based settings) with evidence-based teen pregnancy prevention programming.

Logic Model

The MDPH PREP program logic model (**Attachment A**) serves as a visual representation of the resources needed to achieve Massachusetts' goals and objectives related to decreasing teen birth rates and STI incidence rates.

Need Statement

MDPH used an evidence-informed approach to determine which communities in the state would be prioritized for PREP programming. Communities had to meet both of the following criteria to be eligible:

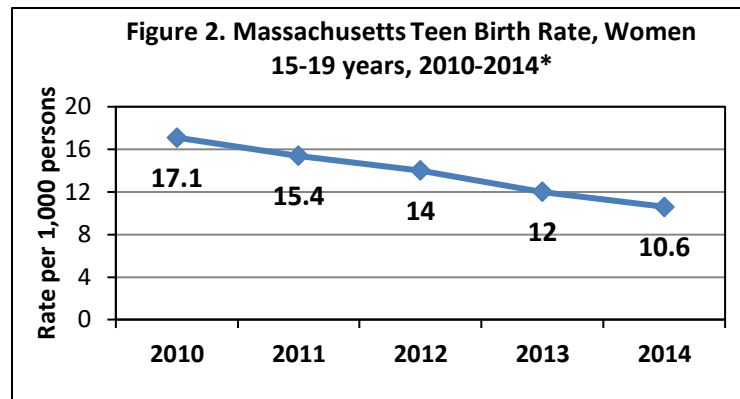
1. The community must be one of the 25 Massachusetts communities with the highest teen birth rates in the state in 2014 **and** the number of teen births in the community in 2014 must be greater than 20;
2. The chlamydia incidence rate among youth aged 15–19 years for 2012 (the most recent year for which data is publicly available) was higher than the 2012 state rate **or** there are disparities in the Hispanic and/or Black non-Hispanic teen birth rates at the local level.

<i>Figure 1. Birth Rates in PREP Target Communities per 1,000 females 15-19 years, 2014¹</i>		
Community	Teen Birth Rate	# of Teen Births
Boston	10.6	276
Brockton	26.2	88
Chelsea	49.3	59
Chicopee	18.6	35
Fall River	28.4	79
Fitchburg	23.1	41
Framingham	14.9	35
Haverhill	14.9	41
Holyoke	39.8	60
Lawrence	35.6	121
Lowell	21.6	89
Lynn	29.2	94
New Bedford	33.3	101
Pittsfield	23.9	32
Revere	20.9	30
Somerville	12.9	22
Springfield	35.0	239
Worcester	16.3	126
Massachusetts	10.6	2402
United States	24.2	

Teen Birth Rates

¹ Registry of Vital Records and Statistics, MDPH, 2014

According to the National Center for Health Statistics, Massachusetts had a teen birth rate of 10.6 per 1,000 women aged 15–19 years in 2014. While Massachusetts had the lowest teen birth rate in the nation in 2014, and the rate has declined over the past 5 years (Figure 2), the PREP target communities have teen birth rates between 1.2–4.5 times the state rate and up to twice the national rate



(Figure 1). In 2014, the combined number of births among 15–19 year old women in these communities made up 65% of all teen births in the state, 80% of Black non-Hispanic teen births in the state and 83% of Hispanic teen births in the state.

Teen Pregnancy

The Massachusetts' teen pregnancy rate among women under the age of 20 in 2010, the most recent year for which data is available, was 37/1,000 females.² Teen pregnancy data is not available for young women aged 10–14 years.

Figure 3. Chlamydia incidence rates per 100,000 persons aged 15-19 years, Massachusetts residents, 2012

Community	Chlamydia incidence rate
Boston	2807.8
Brockton	3032.0
Chelsea	2793.1
Chicopee	2589.3
Fall River	1846.9
Fitchburg	1483.4
Framingham	691.2
Haverhill	1606.4
Holyoke	3656.2
Lawrence	3066.7
Lowell	2047.8

* Registry of Vital Records and Statistics, MDPH, 2014

² Massachusetts does not calculate pregnancy rates. This estimate is from <https://thenationalcampaign.org/data/compare/1678>, accessed March 22, 2015.

STI Incidence Rates

Sexually transmitted infection rates among young people are an indicator that they are at risk for unintended pregnancy.

The rates of chlamydia infection (per

Lynn	2458.8
New Bedford	1628.6
Pittsfield	2049.6
Revere	1510.7
Somerville	1304.4
Springfield	3904.7
Worcester	1630.4
Massachusetts	1256.7

100,000 teens aged 15–19 years) are up to three times higher in some of the target communities compared to the state rate (Figure 3). Due to the small number of HIV, syphilis, and gonorrhea cases when broken down at the local level, these rates are not presented.

Social Determinants

Analysis of National Survey of Family Growth done in 2012 suggests that teen girls living in areas with low incomes and high income inequality have higher teen birth rates.^{3,4} Several PREP target communities have poverty levels 2.5 times higher than the Massachusetts poverty level.⁵ Within the target communities, there are disparities in poverty levels by race/ethnicity, with the Hispanic poverty level being between 1.5–3 times higher than the White non-Hispanic level in all target communities (with the exception of Revere), and the Black non-Hispanic poverty level being up to 3.5 times higher than the White non-Hispanic poverty level in some target communities (Figure 4).

Figure 4. Percent of individuals living below the poverty level in PREP Massachusetts target communities, 2014⁶

³ Melissa Kearney and Phillip B. Levine, "Income Inequality and Early Nonmarital Childbearing: An Economic Exploration of the Culture of Despair," *National Bureau of Economic Research Working Paper* No. 17157 (2011). Also see: Melissa Kearney and Philip B. Levine, "Explaining Recent Trends in the U.S. Teen Birth Rate," *National Bureau of Economic Research Working Paper* 17964 (2012); and Melissa Kearney and Philip B. Levine, "Why Is the Teen Birth Rate in the United States so High and Why Does It Matter?" *National Bureau of Economic Research Working Paper* 17965 (2012).

⁴ LM Hunter, U.S. Teen Birth Rate Correlates With State Income Inequality, April 2014 <http://www.prb.org/Publications/Articles/2012/us-teen-birthrate-income.aspx> (Accessed 3/21/15)

⁵ American FactFinder, 2014 American Community Survey, http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml#none

⁶ American Community Survey, 2014. http://factfinder.census.gov/faces/nav/jsf/pages/community_facts.xhtml#none

Community	Poverty level	White non-Hispanic poverty level	Black non-Hispanic poverty level	Hispanic poverty level
Boston	21.9%	16.6%	25.4%	33.2%
Brockton	17.9%	15.0%	20.8%	26.3%
Chelsea	22.6%	16.9%	27.2%	25.9%
Chicopee	12.9%	10.0%	35.3%	31.9%
Fall River	23.3%	20.9%	36.1%	51.0%
Fitchburg	19.8%	16.1%	33.5%	35.9%
Framingham	11.3%	9.3%	31.5%	27.2%
Haverhill	12.2%	11.0%	12.5%	27.8%
Holyoke	30.1%	28.8%	32.9%	47.4%
Lawrence	28.5%	23.0%	26.9%	32.3%
Lowell	19.1%	15.0%	21.6%	36.6%
Lynn	20.9%	16.4%	20.2%	30.5%
New Bedford	24.0%	19.4%	29.6%	42.5%
Pittsfield	16.4%	14.2%	35.8%	31.7%
Revere	15.5%	16.2%	12.2%	17.0%
Somerville	15.5%	12.7%	34.1%	24.7%
Springfield	30.1%	23.4%	28.3%	44.9%
Worcester	22.0%	20.2%	23.1%	40.9%
Massachusetts	11.6%	9.0%	22.4%	30.2%
United States	15.6%	12.8%	27.3%	24.8%

Massachusetts' Plan for Reducing Teen Birth Rates

Massachusetts' State Health Improvement Plan identifies reducing teen births in communities with high teen birth rates as one of the Department's key priorities, with a goal of reducing the teen birth rate by 10% in highest need communities. Identified strategies for achieving this goal include:

- Provide comprehensive, culturally appropriate family planning services and education for adolescents and young adults.
- Develop tools for proactive life planning and risk management.
- Provide education in schools to encourage wellness, healthy relationships and optimal reproductive health that is responsive to all genders and sexual orientations.
- Develop educational/outreach programming that addresses the issues of consent and coercion.

- Ensure that strategies for youth with disabilities are included in all educational efforts.
- Prepare and disseminate Teen Birth Packets to communities with highest rates to promote community awareness and action.
- Promote sustainability for evidence-based teen pregnancy prevention programs in targeted communities.
- Focus program efforts on high-risk population groups and communities.
- Support and expand school based health clinics.

Many of the strategies listed above are promoted by current programmatic efforts within the Sexual and Reproductive Health Program, notably the proposed PREP program. PREP will support community-level providers and schools by providing ongoing training and technical assistance to offer evidence-based teen pregnancy prevention curricula. Training on recruiting and retaining high-risk youth populations, including LGBTQ youth and youth in or aging out of foster care, is also provided. Technical assistance includes working individually with specific providers to determine the most effective evidence-based program for a specific population (i.e. for youth in or aging out of foster care) and identifying opportunities for being trained to conduct this curriculum and best practices for working with the population being targeted. MDPH epidemiologist and program coordinators regularly review data on program attendance and fidelity, as well as youth surveys, to identify areas where providers are excelling or should work toward improving.

MDPH encourages funded providers to network with each other on best practices for reaching vulnerable populations, and provides opportunities for networking and information-sharing at least annually through statewide provider meetings. Over the course of the next PREP grant cycle, MDPH will work more closely with funded providers to build a strong referral network among youth-serving agencies, schools, and clinical providers offering reproductive

health services in their communities. Providers will be required to reach out to other youth-serving organizations that work with populations at risk for teen pregnancy, including LGBTQ youth, youth with disabilities, and youth in foster care. Close collaboration and buy-in from a network of youth-serving organizations and clinical providers will ensure that vulnerable youth populations are able to either access or be referred to sexual health programming through multiple venues.

Due to the small population of Native American youth in Massachusetts, the state plan does not specifically target Native youth. However, funded providers are encouraged to reach out to this population and offer services whenever possible.

Target Populations

MDPH's PREP program is designed to provide intensive, evidence-based programming for youth at high risk for pregnancy and STIs. MDPH will grant 5 – 7 contracts to community-based organizations (CBOs) to provide PREP programming, as well as provide funding to the Massachusetts Department of Elementary and Secondary Education (MDESE) to support school districts in communities with high teen birth rates and low-performing schools to provide PREP services in a school setting.

This PREP program will serve 2,500 youth annually in 5–7 community-based sites and 3 school districts. Each community-based site will serve approximately 170 youth aged 15–19 years annually (a total of 1,000 youth) and each of the 3 school districts will serve approximately 500 youth aged 10–14 in middle schools (a total of 2,500 youth). Community-based sites will specifically target youth aged 18–19 years, with a goal of having at least 20% of program participants in community-based programs within the age range of 18–19 years.

MDPH is proposing to target specific priority populations through PREP programming: Hispanic youth; African-American youth; lesbian, gay, bisexual, transgender, and questioning

(LGBTQ) youth; pregnant and parenting youth under the age of 21; youth in foster care; and youth with disabilities. Youth with co-occurring risk factors will be prioritized. Each of these populations and their need for teen pregnancy prevention is discussed in more detail below.

Hispanic and African-American Youth

The Massachusetts PREP program aims to serve at least 850 Hispanic youth and 275 African-American youth. These estimates are based on the average percentage of Hispanic and Black non-Hispanic populations aged 10–19 years in the PREP target communities. There are important disparities in teen birth rates by race/ethnicity both statewide and within priority communities (Figure 5). In 2014, the Hispanic teen birth rate in Massachusetts was nearly seven times the birth rate for White non-Hispanic teens (35.7/1,000 persons vs. 5.4/1,000 persons respectively). There are also disparities in the Hispanic and Black non-Hispanic teen birth rates at the local level (Figure 5).

<i>Figure 5. Massachusetts Birth Rates by Select Community and Race/Ethnicity per 1,000 females 15–19 years, 2014</i>			
Community	White non-Hispanic	Black non-Hispanic	Hispanic
Boston	1.7	14.6	29.1
Brockton	12.4	32.7	51.5
Chelsea	---*	---*	62.2
Chicopee	6.8	---*	52.5
Fall River	19.1	77.4	74.9
Fitchburg	11.9	---*	49.3
Framingham	---*	---*	67.9
Haverhill	14.4	---*	54.3
Holyoke	---*	---*	53.0
Lawrence	---*	---*	40.5
Lowell	14.2	17.4	34.4
Lynn	13.3	13.3	46.3
New Bedford	15.7	57.6	70.8
Pittsfield	20.7	55.6	---*
Revere	8.3	0.0	44.0
Somerville	5.9	---*	45.6
Springfield	8.4	31.1	53.9
Worcester	7.1	18.3	38.3
Massachusetts	5.4	15.4	35.7

*Rates are not calculated for these groups due to small counts (<5 births per group)

According to the Massachusetts Youth Risk Behavior Survey (YRBS), Hispanic and Black non-Hispanic high school students are more likely to report risky sexual behavior compared to White non-Hispanic and Asian non-Hispanic students. The percentage Hispanic and Black non-Hispanic high school students reporting ever having had sex in 2013 (52.8% and 48.7% respectively) was higher than the percentages among White non-Hispanic and Asian non-Hispanic students (37.9% and 18.2% respectively). Black non-Hispanic and Hispanic students also are more likely to report having more than four lifetime sexual partners (23.7% and 15.7% respectively) compared to 8.0% for White non-Hispanic students and 3.2% for Asian non-Hispanic students.

LGBTQ Youth

Massachusetts high school students identifying as lesbian, gay, or bisexual (LGB) are 1.4 times more likely to report ever having had sex than students identifying as heterosexual (55.7% vs. 39.3%) and 2.6 times more likely to have had sex with four or more partners (24.9% vs. 9.4%).⁷ Compared to heterosexual students, LBG students are also four times more likely to report not using any contraceptive method to prevent pregnancy (34.0% vs. 8.3% respectively) and 1.5 times more likely to report no condom use at last intercourse (60.2% vs. 40.5%). LGB students are 3.2 times more likely to report having ever been or gotten someone pregnant (11.1% vs. 3.5%) compared to heterosexual students.⁸ Community level data on youth identifying as LBGTQ is not available.

All PREP providers, inclusive of both CBOs and school districts, will receive ongoing training and technical assistance on working with LBGTQ youth and other at-risk populations. Training and technical assistance will include the dissemination of policies and practices that address harassment and bullying. All PREP providers will be required to have policies stating

⁷ YRBS, 2011 & 2013

⁸ YRBS, 2011 & 2013

they do not discriminate on the basis of race, ethnicity, sexual orientation, or gender identity. Policies and practices will be confirmed during program site visits over the course of the grant period.

Pregnant and Parenting Youth

In 2014, 12% of teen births among Massachusetts women aged 15–19 years and 14% of births among Massachusetts women aged 18–19 years were 2nd or higher parity; this demonstrates the need to target pregnant and parenting youth in prevention programming.

Youth in Foster Care

Seventy-five percent of young women aging out of foster care become pregnant before age 21, and half of 21 year old men who are aging out of foster care report that they have caused a pregnancy.⁹ These rates are 2.2 and 2.6 times higher, respectively, than the rates among young people not in foster care.¹⁰ Moreover, nearly two-thirds of young women in foster care who have been pregnant also will have a subsequent pregnancy before 21, compared to 45% of their peers outside the system.¹¹

Youth with Disabilities

According to the Massachusetts YRBS, students reporting any disability were more likely to report ever having had sex (47.3%) and having had 4+ sexual partners (14.8%) compared to those reporting no disability (38.8% and 9.6% respectively). Students reporting any disability were 1.8 times more likely to report ever having been or having gotten someone pregnant than those reporting no disability, 6.6% vs. 3.5%.¹²

⁹ https://thenationalcampaign.org/sites/default/files/resource-primary-download/Briefly_ItsYourResponsibility.pdf

¹⁰ Ibid.

¹¹ Courtney, M., Dworsky, A., Cusick, G.R., Havlicek, J., Perez, A., & Keller, T. (2007) Midwest Evaluation of the Adult Functioning of Former Foster Youth: Outcomes at Age 21. Chapin Hall Center for Children at the University of Chicago: Chicago. http://www.jimcaseyouth.org/docs/ch_midwest_study121207.pdf

¹² YRBS, 2011 & 2013

Program Management

MDPH has the experience and capacity to continue to manage and expand a statewide PREP program. MDPH has funded CBOs to deliver evidence-based teen pregnancy and STI prevention education and medically-accurate programming to youth ages 10–19 within high teen birth rate communities since 2006. MDPH has successfully managed the Administration for Children and Families formula PREP grant since 2010 as well as other essential public health programs that target at-risk and underserved populations including Title V Maternal and Child Health Services Block Grant and the Title X Family Planning Program.

Governance and Staff Roles

The PREP program is housed within MDPH's Sexual and Reproductive Health Program and located in the Division of Health Access, one of three Divisions in the Bureau of Community Health and Prevention. A full-time PREP Coordinator is responsible for operational and fiscal oversight of the program including the collaborative partnership with MDESE, contract management, and coordinating training and technical assistance to CBOs to assure fidelity to evidence-based program models.

After a competitive procurement process, roles and responsibilities for all funded community partners will be clearly delineated in Memoranda of Understanding, and specified in contract conditions accompanying funding awards. The PREP Coordinator will also work closely with MDESE's School Health Analyst who will be responsible for oversight of the PREP program in school systems located in communities with high teen birth rates and low performing schools. Together they will monitor program implementation, fidelity to evidence-based curricula, integration of adulthood preparation subjects, and will provide training, technical assistance, and support to PREP educators.

Managing a Statewide PREP Program

MDPH has a long history of working across a statewide geographical catchment area with a diverse array of providers and agencies. MDPH staff use multiple strategies to manage a cohesive and effective program including close contract monitoring, ongoing communication with providers and MDPH staff, collaborating with key community stakeholders, training and providing targeted technical assistance to ensure that interventions are implemented consistently and with fidelity. Building on past successes, the PREP Coordinator will use a multi-faceted approach to program support and monitoring to ensure high fidelity to the selected evidence-based curricula that includes monitoring fidelity logs, managing pre- and post-test surveys, conducting site visits, providing training and technical assistance, conducting provider meetings, and disseminating relevant materials and information.

- **Fidelity Logs.** MDPH will design fidelity logs that are tailored to mirror each evidence-based curricula selected by funded providers. After each session delivered, the trained PREP educator will complete the appropriate log, which will include a detailed description of the implementation of the evidence-based approach, and any green, yellow, or red light adaptations made to the session. Fidelity logs will be sent to the PREP Coordinator on a monthly basis.
- **Pre- and Post-Test Surveys.** PREP educators will be responsible for disseminating pre-tests to PREP program participants at the beginning of each cohort and post-tests to program participants at the conclusion of the delivery of evidence-based curricula. Surveys will cover both knowledge and behavior and will be used to monitor changes over time and effectiveness of the curricula as implemented.
- **Site Visits.** The MDPH PREP Coordinator and/or MDESE's School Health Analyst will conduct annual program evaluations with a site visit and periodic on-site education session observations to provide direct supervision and technical assistance in the

implementation of programming for youth.

- **Trainings and Technical Assistance.** MDPH will offer professional development and program planning support on select topics pertaining to evidence-based teen pregnancy prevention, youth development, preparation for adulthood, and program evaluation to all providers throughout the year.
- **Provider Meetings.** The PREP Coordinator will conduct periodic networking and informational meetings for all funded providers to address contract management, networking opportunities and additional professional development opportunities to contracted providers, school personnel, and other stakeholders.
- **Information and Materials Dissemination.** The PREP Coordinator will disseminate or otherwise make available relevant materials and current research related to teen pregnancy and prevention strategies to all funded providers.

To assure program fidelity, MDPH epidemiologists work closely with PREP program staff to collect and analyze program data. In addition to collecting process data such as fidelity logs, the individual level pre- and post-test survey data is collected and analyzed to measure changes in attitudes, knowledge, and behaviors over the course of curriculum-based programs. This data is used by MDPH leadership staff to evaluate the effectiveness of programming across all funded sites as a whole and determine if any changes in programming or monitoring are needed.

Accountability

The PREP Coordinator will conduct oversight activities described above in consultation with an MDPH epidemiologist and the Acting Director of the Sexual and Reproductive Health Program. This team will assess training and technical assistance needs identified by partner organizations and develop action plans to address challenges related to maintaining fidelity to PREP programming and effective incorporation of adult preparation subjects.

In addition to these programmatic oversight activities, MDPH exercises fiscal oversight over all contracted agencies. The Executive Office of Health and Human Services (EOHHS) manages a provider qualification process to evaluate a provider's administrative and financial condition. The MDPH Purchase of Service (POS) office is designated by EOHHS to perform the provider qualification review when MDPH is the principal purchasing agency for a provider. Results of the provider qualification process are shared through the EOHHS Provider Data Management system. The main objectives of the provider qualification process are to determine whether the provider has the capabilities to comply with the many federal and state administrative requirements for expenditures of public funds and sufficient fiscal and administrative capacity to fulfill its contractual obligations. The requirements of the provider qualification process include

- Submission of Uniform Financial Statements and an Independent Auditor's Report,
- Submission of a Federal OMB Circular A-133 Audit Report for agencies accepting federal funds in excess of \$500,000 and
- Verification of compliance with state pricing requirements outlined in Massachusetts regulations governing contract compliance, financial reporting and auditing requirements (808 CMR 1.00).

After close review of all documents, agencies are assigned a provider qualification status. Agencies must have an acceptable provider qualification status to contract with the Commonwealth. If key issues are identified during review of the financial reports listed above, a provider may be required to develop and follow a corrective action plan. If particularly troublesome problems are identified (for example, severe financial problems or a "going concern" audit opinion), contracts are only executed for a year at a time, the provider is added to the Secretariat's watch list and special reporting is required from the provider. This process allows an opportunity for MDPH fiscal and audit staff to engage with providers to address and

prevent audit findings and other fiscal issues. Fiscal oversight for the PREP grant will be provided by the PREP Coordinator in conjunction with staff from the Purchase of Service office.

Once provider contracts are in place, the PREP Program Coordinator will monitor the budgets of partner CBOs monthly to ensure that funds are used in accordance with the funding announcement. Invoices will be submitted monthly along with Service Delivery Reports describing milestones achieved, successes and challenges with program implementation, community partnerships and associated activities, staffing and roles, outreach activities and events, numerical data on number of youth served and number of referrals received and provided.

See also the *Performance Measurement* section for more information on how programs are managed and evaluated and accountability is ensured.

Education, Training, and Monitoring

MDPH has demonstrated the capacity to monitor and strengthen providers through experience with implementing evidence-based curricula with fidelity and a well-established procurement and contracting processes. Initially, all PREP providers will be required to attend a 3-day sexuality educator's certification course through Planned Parenthood, and then a 2-day PREP course provided by MDPH/MDESE staff. As described above, the PREP Coordinator and MDESE's School Health Analyst will conduct on-site observations of education sessions and annual site visits to monitor program quality and identify additional training or technical assistance needs. In addition, fidelity logs will be used as a monitoring tool to assess how educators are performing, the efficacy of the sessions, to identify training needs and any adaptations to the curricula, if necessary. In the case of staff turnover, the PREP Coordinator will provide technical assistance and coordinate observation sessions and shadowing of seasoned providers to support newly-trained PREP staff. Through these efforts MDPH assures youth at

highest risk will have improved access to evidence-based education and high-quality programming to prevent unintended pregnancies and transmission of STIs.

Program Plan/Approach

As described at the outset, the goals of the Massachusetts PREP program are to 1) Decrease the teen birth rate among target populations in priority communities through increased access to evidence-based education; and to 2) Decrease STI incidence among target populations in priority communities through increased access to medically-accurate, age-appropriate programming. MDPH is committed and excited to build on past experiences and successes to renew the PREP program to ensure continuity of preventive evidence-based services across the state.

Service Delivery Mechanisms

MDPH will continue to collaborate with MDESE as a strategy for working with middle school youth in priority communities with high teen birth rates and low performing schools. MDESE will award direct grants to school districts to implement their comprehensive curriculum package *It PaYs: Partners for Youth Success*, which is based on the evidence-based curriculum *Making Proud Choices!*, and incorporates the three required adulthood preparation subjects. This model has been successful in engaging schools in pregnancy and STI prevention activities and delivering effective curricula to thousands of students.

In addition to school-based programming, MDPH will use a competitive procurement process to identify 5–7 qualified and committed CBOs to deliver PREP services to priority populations in select high-risk communities throughout the state. As part of the procurement process, applicant agencies must select one of the seven evidence-based curricula that MDPH has approved for the PREP program to implement (see *Models to be Replicated and Implemented*). Services will be provided in a variety of settings including youth development programs, school-based and after-school programs, Massachusetts Department of Children and

Families (DCF), Massachusetts Department of Youth Services (DYS), and within health clinics. PREP program staff will be trained to deliver the evidence-based curricula as described above.

Funded providers, including MDESE, will be expected to create or maintain strong working relationships with other community-based and youth-serving organizations such as local family planning agencies, school-based health centers, DCF, DHS, local mental and behavioral health organizations, and schools. PREP staff will use this network of youth-serving providers as a referral system for PREP program participants who need additional support services. PREP providers will coordinate referrals to appropriate organizations as needs are identified. MDPH will track referrals through monthly Service Delivery Reports that describe activities, partnerships, staffing, outreach, events, number of youth served, and number of referrals received and provided.

Fidelity Monitoring

MDPH's PREP Program Coordinator is responsible for monitoring, managing, and providing support to all funded CBOs. During the first three months of the program, the PREP Program Coordinator will meet with program directors from partner CBOs to review progress in recruiting participants, program implementation, data collection, and fidelity to the curricula. The PREP Program Coordinator will also work with partners to identify concerns and challenges and strategies for addressing them effectively.

MDPH's PREP Program Coordinator will work with an MDPH epidemiologist to monitor service delivery during monthly conference calls that will provide an opportunity to discuss fidelity logs, challenges and successes with delivery of evidence-based curricula and adulthood preparation subjects, and progress towards reporting, tracking, and achieving federal and state-developed performance measures. To ensure that PREP programming and curricula are implemented with fidelity, the PREP Coordinator will conduct two site visits to each funded

program site in the first year of the program, and annual site visits thereafter. Site visits will consist of a review of the program model, progress toward program goals and objectives, staffing, data collection, and performance measures. In addition to annual site visits, the PREP Coordinator and the MDESE School Health Analyst will conduct observations of program sessions at each site at least annually to monitor fidelity to evidence-based curricula, provide support to PREP staff, and identify training and/or technical assistance needs.

For ongoing monitoring, the PREP Coordinator will review fidelity logs monthly. Each funded PREP provider will submit fidelity logs that correspond with the evidence-based curriculum being implemented. Fidelity logs include a section where providers can indicate if a green, yellow, or red light adaptation was needed for the session and provide a description and rationale. Red light adaptations are considered an unacceptable change to the curriculum; however, there is always a possibility that unforeseen changes in setting, participation, and/or availability of materials and resources can occur. If multiple yellow or red light adaptations are reported, the PREP Coordinator will schedule a call with the program director to develop strategies to ensure fidelity to the evidence-based curriculum.

Emphasis on Abstinence and Contraception

All seven of the evidence-based curricula that applicant agencies can propose to implement address both abstinence and contraception in a program designed to prevent pregnancy and STIs. Most of these curricula do not provide information on contraception other than condoms and abstinence, so MDPH will work with funded providers to effectively incorporate additional information on the array of contraceptive options that are available, including long active reversible contraceptives (LARCs) such as hormonal implants and intrauterine devices.

Medically Accurate and Complete Programming

MDPH is committed to the provision of medically accurate and complete information to educate youth about pregnancy prevention and contraception (including abstinence), the responsibilities and consequences of being sexually active, becoming a parent, and about how early pregnancy and parenthood can interfere with educational and other goals, and about risks associated with sexually transmitted infections, including HIV. In fall of 2015 organizational changes at MDPH shifted programs and oversight conducive to more effective internal collaborations and will ensure that funded programs have all of the support necessary to continue to provide medically accurate and complete information. For example, the new Acting Director for Adolescent Health and Youth Development is also the Acting Director of the Sexual and Reproductive Program which supports family planning clinics in the state. This program structure facilitates collaboration across a wider array of programs, and promotes referrals and the sharing of resources.

To support collaboration and dissemination of medically-accurate materials and resources, MDPH will convene trainings and community of practice meetings. These meetings will also offer funded programs opportunities to share best practices with one another and identify collective training and technical assistance needs.

Adulthood Preparation Subjects (APS)

As part of the competitive procurement process, applicant organizations will be required to describe how the proposed program will incorporate the three adulthood preparation subjects (APS) that MDPH has identified are essential components of Massachusetts' PREP program: healthy relationships, adolescent development, and financial literacy. MDPH will require funded providers to implement a minimum of a 60-minute session for each of the APS topics for all PREP participants.

To support the delivery of these APS, MDPH will have access to relevant 60-minute sessions developed by MDESE that address these topics. Applicant organizations can couple these sessions with Making Proud Choices! or other eligible curricula. In 2010–2011 MDESE conducted research on evidence-based curricula and chose to implement Making Proud Choices! into partnering low-performing schools. To supplement this curriculum to include APS, MDESE created the *It PaYs* program which includes the eight modules of Making Proud Choices! plus four 60-minute modules on healthy relationships, adolescent development, financial literacy, and puberty. MDESE will be able to provide critical technical assistance and training support to CBOs that chose to integrate MDESE's PREP program model for integrating APS into evidence-based curricula.

In addition to these APS, MDPH will promote the use of a Life Plans tool that MDPH has developed as a strategy for addressing pregnancy and STI prevention with youth. The Life Plans tool is designed to give providers the information and skills they need to support young people with goal-setting by using client-centered, motivational interviewing techniques. The approach guides youth through considering their priorities, identifying changes they would like to make, setting goals, and monitoring their progress. Materials such as the “Coach’s Tool” designed for youth workers include topics for discussion regarding education and work, self-care, relationships, and sexual health. Take-home workbooks for youth are also available. The PREP Coordinator will support the effective integration of APS into PREP programming the same way she manages the implementation of evidence-based interventions through monitoring fidelity logs, site visits, session observations, and regular contact with funded providers.

Resources and Materials

In collaboration with MDESE, MDPH will provide training and technical assistance to funded providers as they implement the selected evidence-based curriculum and APS. As

described above, all PREP providers will be required to attend a 3-day sexuality educator's certification course through Planned Parenthood, and a 2-day PREP course provided by MDPH/MDESE staff that emphasizes the importance of fidelity and integration of APS. The PREP Coordinator will work closely with MDESE's School Health Analyst and CBOs to identify both immediate and ongoing training needs associated with the selected evidence-based curricula, APS, and other relevant pregnancy and STI prevention programming.

Evidence-Based Curricula

Based on a statewide needs assessment, MDPH will fund CBOs with the capacity to focus PREP programming to reach youth in the following priority populations: Hispanic/Latino youth, African-American youth, LGBTQ youth, expectant and parenting teens <21, youth in or aging out of foster care, and youth with physical and intellectual disabilities.

As part of the competitive request for response (RFR) process, applicants must select a curriculum, determine which priority population(s) to target, and must identify how APS will be incorporated into the proposed PREP program. After careful consideration of the federally-approved evidence-based teen pregnancy prevention interventions, MDPH identified **seven** curricula that are eligible to be implemented in community-based settings:

- Making Proud Choices!
- ¡Cuídate!
- Children's Aid Society (CAS)-Carrera Program
- Rikers Health Advocacy Program (RHAP)
- Teen Outreach Program (TOP)
- Be Proud! Be Responsible!
- It's Your Game: Keep It Real (IYG)

Making Proud Choices! This curriculum is specifically designed for middle-school youth

and aims to provide young adolescents with the knowledge, confidence and skills necessary to reduce their risk of sexually transmitted diseases (STDs), HIV and pregnancy. While it was evaluated with African American youth aged 11–13 years the developer suggests the curriculum can be used with older youth.

¡Cuídate! This curriculum is a culturally tailored program designed specifically for Latino youth that emphasizes Latino cultural beliefs to frame abstinence and condom use as culturally accepted and effective ways to prevent unwanted pregnancy and sexually transmitted diseases, including HIV/AIDS.

Children's Aid Society (CAS)-Carrera Program. This is a seven-year program that targets 10–12 year olds using a holistic, youth development approach to prevent unplanned pregnancy. Emphasis is placed on academic education, exposure to a work environment, family life and sexuality education, self-expression, lifetime individual sport, and medical and dental care.

Rikers Health Advocacy Program (RHAP). This program has been proven effective with youth in state systems of care. The program features a “Problem-Solving Therapy” approach, which focuses on identifying problems, defining and formulating a problem, generating alternative solutions, decision making, and implementing a solution.

Teen Outreach Program (TOP). This curriculum uses interactive group discussions on topics like healthy relationships, adolescent development and sexuality, goal-setting, decision making, and values clarification. This program was designed for and tested with disadvantaged, high-risk youth in grades 9–12, but the suggested target population includes middle school youth in grades 6–8.

Be Proud! Be Responsible! This curriculum aims to affect knowledge, beliefs, and intentions related to condom use and sexual behaviors such as initiation and frequency of

intercourse. The 5-hour intervention was designed for diverse populations of youth and was evaluated with mostly African-American adolescents, ages 11–14.

It's Your Game: Keep It Real (IYG). This is a classroom and computer-based HIV, STI, and pregnancy prevention program designed for 7th and 8th graders. The curriculum integrates group-based classroom activities (e.g., role plays, group discussion, and small group activities) with personalized journaling and individually tailored computer-based activities.

These programs closely examine the root causes of teen pregnancy and other youth sexual health risk-taking behaviors, deliver medically accurate health information, and use evidence based to support the implementation of specific models to address priority populations.

Lessons Learned

Important lessons have been learned through the collaboration between MDPH and MDESE to provide effective PREP programming since 2010. MDPH has drawn upon MDESE's experiences adapting Making Proud Choices! to add four additional sessions, including three essential APS. MDESE's practices also informed the MDPH initial training plan and ongoing fidelity monitoring strategies to assure adherence to evidence-based curricula as well as effective incorporation of APS.

When the MDPH PREP Coordinator position was vacant, the need for a point person to monitor and manage this statewide program was reinforced. Funded programs need regular support and a coordinator to monitor progress toward the overall program's goals and objectives. As of the writing of this grant, the MDPH PREP Coordinator position has been offered to a candidate who is awaiting final approval from Human Resources. MDPH expects to have the position filled prior to the grant being awarded.

PREP within Existing Programs

Massachusetts has long demonstrated a commitment to providing comprehensive sexual health education and teen pregnancy prevention programs. The PREP Program Coordinator works closely with the Teen Pregnancy Prevention Program (TPP) Coordinator to create collaborations and linkages to existing services in communities across the state. The state TPP program funds and provides programmatic oversight to 15 providers in high teen birth rate communities that use evidence-based curricula or promising practices including Making Proud Choices!; Teen Outreach Program; California's Adolescent Sibling Pregnancy Prevention Program; Focus on Youth; ¡Cuídate!; Power Through Choices; and an adaptation to the CAS-Carrera model to address teen pregnancy among our highest risk youth. Programs offer additional services to participants that support holistic youth development (e.g., teen dating violence prevention, support for sexual minority youth, and peer leadership) incorporating components into the curricula that foster creativity, leadership opportunities, educational attainment and access to local resources.

Currently funded TPP providers will be eligible for PREP funding to reach additional groups of high-risk youth in their communities. New providers are also eligible for funding, which will bring in new organizations and new perspectives on this work. All providers will be expected to collaborate with other community-based providers in their service area, including state-funded TPP programs, family planning programs, schools and school-based health centers, and other typed of programs. Both providers and participants of the PREP program will benefit from collaboration between the proposed PREP program and other MDPH-supported programs.

Coordinated Referrals

Through the competitive RFR process MDPH will require funded providers to have strong partnerships with schools, family planning agencies, DCF, DYS and other youth-serving organizations. Funded providers will also be required to participate in community-based

coalitions and youth advisory groups in their catchment area to foster relationships with other youth serving agencies. Agencies are encouraged to explore opportunities to make their PREP program an integral part of the communities they serve to ensure longevity of services, by also including young people in this process.

Through maintaining a network of organizations that provide a variety of services for youth, PREP participants with additional health, behavioral health, or mental health needs will be referred to an appropriate agency. The referring PREP provider will be responsible for coordinating follow-up to ensure the youth's needs are met. Funded agencies will report on referral activities and aggregate numbers of young people with provided and completed referrals on the required monthly Service Delivery Report to MDPH.

Models to be Replicated and Implementation Strategy

Rationale for Evidence-Based Models

MDPH reviewed the list of 37 evidence-based curricula and chose to focus on a group of seven curricula that align with Massachusetts' PREP program goals and objectives, are designed for MDPH's priority populations, and were evaluated and proven to affect at least one of two specific outcomes:

1. Increasing contraceptive use and consistency; and/or
2. Reducing pregnancy and birth.

MDPH will not support programs to use evidence-based curricula that use abstinence-only education, are clinic-based, do not encompass the desired age range, are designed only for females, and/or if the target population differs from MDPH's priority population (e.g. youth of HIV-infected parents). Additionally, since the Massachusetts PREP program involves work in community settings as well as in schools, only evidence-based interventions that were tested in after-school or CBO settings are eligible for funding.

The following seven curricula will be available for applicants to choose from when implementing PREP programming:

Making Proud Choices! This curriculum targets African American, Hispanic, and white adolescents, ages 11–13, attending middle schools and youth-serving community-based programs.¹³ Making Proud Choices! is a comprehensive sex education curriculum that aims to reduce young adolescents' risk of acquiring HIV and other STDs and their risk for pregnancy. The intervention is designed to increase knowledge about HIV, STDs, and pregnancy prevention, promote skills supportive of abstinence and safer-sex practices, and increase adolescents' ability to use condoms correctly. At the 3-month follow-up, adolescents participating in the intervention who were sexually experienced at baseline were significantly less likely to report having had unprotected sexual intercourse in the previous three months. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that Making Proud Choices! includes adulthood preparation content selected by Massachusetts on healthy relationships and adolescent development.¹⁴

¡Cúdate! (Take Care of Yourself). ¡Cúdate! is a culturally tailored program for Latino youth aged 13–18 which aims to reduce HIV risk and unintended pregnancies by affecting sexual behaviors such as intercourse, number of partners, and condom use.¹⁵ The program utilizes important cultural beliefs and attitudes in the Latino community (such as familialism and machismo) to communicate the importance of risk reduction strategies and to increase knowledge and self-efficacy skills. This curriculum is successful with urban middle school students to encourage delay and safer sex. Based on an average of the 3-, 6-, and 12-month

¹³ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

¹⁴ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at: <https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

¹⁵ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

follow-ups, adolescents participating in the intervention were significantly less likely to report having had sexual intercourse in the previous 3 months and less likely to report two or more partners in the previous 3 months. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that ¡Cuídate! includes adulthood preparation content selected by Massachusetts on healthy relationships, adolescent development, and healthy life skills.¹⁶

CAS-Carrera Program. The CAS-Carrera Program targets high-risk youth from 11 years through high school.¹⁷ The CAS–Carrera program is a multiyear, comprehensive program based on a holistic youth development model. The program uses a “parallel family system” strategy to develop long-term relationships with participating teens, provide individually tailored planning and tracking, and practice a non-punitive approach to youth development. It is designed to reduce teen pregnancy, sexual initiation and sexual behaviors, and drug use, and to improve sexual and reproductive health knowledge, employment, health care utilization, and academic skills. At the 3-year follow-up (from program start), female adolescents participating in the intervention were significantly less likely to report a pregnancy in the prior three years, and/or significantly less likely to report being sexually active. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that CAS-Carrera includes adulthood preparation content selected by Massachusetts on healthy relationships, adolescent development, and healthy life skills.¹⁸

Rikers Health Advocacy Program (RHAP). RHAP targets high-risk youth, particularly drug

¹⁶ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at:

<https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

¹⁷ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

¹⁸ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at:

<https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

users and youth in correctional facilities.¹⁹ The program features a “Problem-Solving Therapy” approach, which focuses on identifying problems, defining and formulating a problem, generating alternative solutions, decision-making, and implementing a solution. Topics discussed include general HIV education information, factors related to drug initiation or drug use, the meaning and consequences of sexual activity, the relationship between drug use and sexual activity and HIV risk and how to seek health care services, social services, and drug treatment. At the 5-month follow-up, adolescents aged 16–19 who had engaged in heterosexual sex (prior to arrest) and who participated in the intervention reported significantly higher frequency of condom use during vaginal, oral, or anal sex. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that RHAP includes adulthood preparation content selected by Massachusetts on healthy relationships, adolescent development, and healthy life skills.²⁰

The Teen Outreach Project (TOP). TOP, directed toward reducing rates of teenage pregnancy, school failure, and school suspension, is a) suitable for use with youth from disadvantaged and at-risk circumstances, ages 12–18, b) can be integrated into the curriculum of schools and c) is also implemented as an out-of-school program through community-based youth organizations, local health departments, and social service agencies. The program consists of supervised community service learning, classroom-based discussions, and activities related to key social-developmental tasks of adolescence. Female adolescents participating in TOP were significantly less likely to report a pregnancy during the academic year of the program.²¹ The National Campaign to Prevent Teen and Unplanned Pregnancy reports that TOP includes adulthood preparation content selected by Massachusetts on healthy relationships, adolescent

¹⁹ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

²⁰ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at: <https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

²¹ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

development, and healthy life skills.²²

Be Proud! Be Responsible! is designed to modify behaviors and build knowledge, understanding, and a sense of responsibility regarding STD/HIV risk in vulnerable youth.²³ This 6-session curriculum was designed to be delivered to small groups in classrooms, after school, in community settings, and/or in health clinics with diverse populations of youth 13–18 years old. Three months after the intervention participants reported having significantly fewer female sexual partners and fewer days of vaginal intercourse and vaginal intercourse without a condom (prior 3 months), and were significantly less likely to report having had heterosexual anal sex. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that Be Proud! Be Responsible! includes adulthood preparation content selected by Massachusetts on healthy relationships and adolescent development.²⁴

It's Your Game: Keep It Real (IYG). IYG is a classroom and computer-based HIV, STI, and pregnancy prevention program for 7th and 8th graders that integrates group-based classroom activities (e.g. role plays, group discussion, small group activities) with personalized journaling and individually tailored computer-based activities.²⁵ At follow up, approximately one year after participating in the intervention, students who were sexually inexperienced at baseline were significantly less likely to report having initiated sexual activity. The National Campaign to Prevent Teen and Unplanned Pregnancy reports that It's Your Game: Keep It Real (IYG) includes adulthood preparation content selected by Massachusetts on healthy relationships,

²² The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at: <https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

²³ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

²⁴ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at: <https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

²⁵ U.S. Department of Health and Human Services, *Teen Pregnancy Prevention Evidence Review*. Available at: <http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>

adolescent development, and healthy life skills.²⁶

Implementing Models with Fidelity

Funded agencies will be required to select one of these evidence-based curricula and commit to implementing it with fidelity. MDESE-funded schools will be required to implement MDESE's comprehensive curriculum package *It PaYs: Partners for Youth Success*, which combines Making Proud Choices! with selected adulthood preparation subjects.

The term fidelity refers to “the agreement (concordance) of a replicated program or strategy with the specification of the original” (CSAP, 2001). Program fidelity includes program content, duration of intervention, number, length and order of sessions, recruitment, selected population, setting (e.g. classroom, after-school, community center) and delivery agents (e.g. trained staff, peer leaders). As described under *Program Management*, all MDPH-funded PREP programs will be required to adhere to specific performance measures, and outcomes are monitored through fidelity logs, site visits, observations, and regular communication with the PREP Coordinator.

In some cases it may be necessary to adapt an evidence-based program to a particular setting to better reach the target population. The term *adaptation* is used to describe any changes or departures from the methodology enlisted in the original implementation of the program. Examples of adaptations are the need to translate the curriculum into another language or use the particular model in a different setting other than the setting specified in the evidence-based model. If an applicant agency identifies a need to make an adaptation to the evidence-based curriculum, the organization is encouraged to use ACF's “Making Adaptations Tip Sheet” to describe the proposed adaptation and provide a rationale as to why the adaptation is necessary. In addition, there will be a section in the fidelity log for each curricula where the educator will

²⁶ The National Campaign to Prevent Teen and Unplanned Pregnancy. *Briefly: Adulthood Preparation Topics in Evidence-Based Teen Pregnancy Prevention Programs*. 2010. Available at: <https://thenationalcampaign.org/resource/briefly-adulthood-preparation-topics-evidence-based-teen-pregnancy-prevention-programs>

provide an evaluation of the session in consideration of specific elements associated with the approved curriculum, and will indicate if any adaptations were made.

Ensuring Evidence-based Programming Through a Competitive Sub-Awarding Process

Initially, provider organizations will be selected and awarded contracts through a competitive RFR process to deliver services administered through federal PREP funds (see *Sub-awardee Involvement* section). Applicants must choose one of the seven evidence-based curricula identified by MDPH, and describe how the three APS will be integrated into the program. In the RFR document applicants are advised to use ACF's "Selecting an Evidence-Based Program That Fits: Tip Sheet" to select which evidence-based model to implement, and to use ACF's "Making Adaptations Tip Sheet" to determine if any adaptations are needed, and provide a sound rationale for proposing the adaptation(s). Applications will be scored based on a predetermined set of evaluation criteria that includes an agency's capacity to provide the selected evidence-based curriculum with fidelity and to integrate the identified APS effectively.

Training Plan

MDPH currently provides training and technical assistance to funded agencies to improve their organizational capacity for providing evidence-based prevention services with fidelity. Similarly, MDESE provides training and follow-up support to teachers, other school staff, and community partners for the implementation of their *It PaYs* curriculum. All PREP providers will be required to attend a 3-day sexuality educator's certification course through Planned Parenthood, and then a 2-day PREP course provided by MDPH/MDESE staff. The PREP Coordinator will work closely with MDESE's School Health Analyst and community-based providers to identify both immediate and ongoing training needs associated with the selected evidence-based curricula, adulthood preparation subjects, and other relevant pregnancy and STI prevention programming. Once training needs are identified, the PREP Coordinator will

facilitate provision of necessary trainings, and coordinate observation sessions to support staff and assure adherence to the evidence-based curricula.

Implementation Materials

MDPH will facilitate providers' access to implementation materials and associated trainings that are appropriate for the selected evidence-based model. MDESE will provide the comprehensive materials package for *It PaYs* as well as relevant trainings and technical assistance for this program.

Sub-Awardee Involvement

MDPH will release the PREP RFR electronically on the statewide procurement system, CommBUYS²⁷ on or before March 4, 2016. Current providers funded through MDPH's Sexual and Reproductive Health Program including PREP providers, family planning agencies, and teen pregnancy prevention programs, will be notified via email of the RFR, and will be asked to share the link to the RFR posting with their community partners. The Massachusetts Alliance on Teen Pregnancy, an advocacy organization that works with many community-based providers on teen pregnancy prevention issues, will also send out an electronic announcement to all of its partners and members announcing the availability of these funds.

The procurement will be advertised for 45–60 days during which time the MDPH staff may conduct one or more bidders' conferences and/or use CommBUYS online forums to respond to bidder questions and provide relevant information as requested regarding an RFR.

Applications will be scored based on predetermined evaluation criteria, which will be published as part of the RFR. Following extensive review of proposals, funded providers will be announced by July 1, 2016. Current PREP programs will be extended to September 30, 2016 to ensure any necessary transition or to avoid a break in funding. New PREP contracts will be in

²⁷ <https://www.commbuys.com/bsa/>

place by October 1, 2016 with selected CBOs for the implementation of PREP services targeting high-risk youth in identified priority communities. Formal contracts include agreed upon contract requirements, a budget, and a work plan to assure both programmatic and fiscal accountability.

Concurrently, MDESE will notify all eligible school districts and other interested parties about the availability of grants for PREP programming through their Request for Proposals (RFP) process. In the past, eligibility has been limited to cities and towns with high chlamydia and teen birth rates and the lowest-performing schools. MDESE may make minor changes to eligibility criteria to expand the number of schools that can apply, such as including schools in the second-lowest tier of performance. MDESE's RFP process is non-competitive and open to any eligible school. Initial funding is proportional to the number of potential applicants; once all applications are received additional funding is made available to selected schools to expand programming and/or to implement special projects such as piloting new curricula content. Funded schools must reapply for funding each year for continued support. Grants that are recommended for funding need to be approved by the Associate Commissioner of Education and the superintendent of the partnering school.

Collaborations and Stakeholder Participation

Agencies eligible to apply for PREP funding include youth-serving organization such as family planning agencies, school-based health centers, programs supported by the Massachusetts Department of Children and Families (DCF) and or the Massachusetts Department of Youth Services (DYS), local mental and behavioral health organizations, and low-performing schools. After the competitive RFR process MDPH will develop official contracts with qualified CBOs to provide PREP programming. Selected programs will be identified by July 1, 2016, and ACF will be notified of partnering organizations at that time. Contracts will include budgets, work plans, Memoranda of Understanding, and contract conditions required by the PREP program to assure

fiscal and programmatic accountability. Programs will be required to submit invoices through MDPH's Enterprise Information Management (EIM) system that links activities to funds, so programs cannot receive funds until their activities have been approved by MDPH staff.

MDPH will have a formal Internal Service Agreement with MDESE. This agreement will be established through a formal written agreement outlining contract conditions to include the roles and responsibilities of MDESE to provide grants to middle schools which will integrate the *It PaYs* curriculum. These conditions will also include an agreement that requires regular reporting to MDPH, including fidelity logs and detailed activities and services delivered by each funded school. In addition, MDESE will be required to adhere to data sharing requirements so that MDPH epidemiologists can collect, track and analyze student and school-level data related to PREP program goals and outcomes.

Performance Measurement

MDPH is committed to the collection of performance measurement data and has the capacity to track all categories of PREP performance measures. A MDPH epidemiologist will work closely with the PREP Program Coordinator to ensure collection and synthesis of performance measure data from funded partners in a timely manner.

Output Measures

Measures inclusive of number of youth served and hours of service delivery will be collected using an attendance log developed by the MDPH epidemiologist. For the previous PREP grant cycle, funded providers used an Excel spreadsheet where they entered information on attendance, number of program sessions, and number of hours of service delivery. The spreadsheet calculated totals for each completed curriculum. Attendance logs for the next grant cycle will use a similar format. Funded providers will be required to submit attendance logs following the completion of programming for each cohort served.

Fidelity/Adaptation

Fidelity logs will be developed that correspond to each curriculum. Funded providers will be required to submit a fidelity log for each cohort receiving PREP programming. Logs must be completed and submitted electronically every month. The logs will include information on any adaptations made to each session in the curriculum used. If providers report making yellow or red light adaptations, the PREP Program Coordinator will review these adaptations and provide technical assistance. As noted previously, red light adaptations are considered an unacceptable change to the curriculum; however, there is always a possibility that unforeseen changes in setting, participation, and/or availability of materials and resources can occur.

Implementation and Capacity Building

A component of the competitive RFR application will require agencies to describe their experience and competence working with the identified priority population/s, and describe their partner network of youth-serving organizations. MDPH will monitor funded providers through monthly Service Delivery Reports that describe program activities including milestones achieved, successes and challenges with program implementation, community partnerships and associated activities, staffing and roles, outreach activities and events, numerical data on number of youth served and number of referrals received and provided.

Outcome Measures

Funded providers will administer paper and pencil pre- and post-test surveys to youth participating in PREP programming. Surveys will be confidential and anonymous. After completing the surveys, providers will mail them to MDPH. The MDPH data processing unit

will manually enter survey data and a dataset (either an Excel or Text file) will be generated for analysis by a MDPH epidemiologist.

Community Data

A MDPH epidemiologist will obtain data on teen birth rates at the state and local level from the Massachusetts Registry of Vital Records and Statistics. Rates by race/ethnicity will also be available. Surveillance data on STIs is available at the state and local level from the MDPH Bureau of Infectious Disease.

Evaluation

MDPH assures that the state and its sub-awardees, including MDESE, commits to accept and fully participate in all aspects of a national PREP evaluation if selected. All evaluation protocols established by ACF and conducted by its designee contractors will be adhered to. MDPH is not proposing a local evaluation.

Additional Assurances

Nondiscrimination

MDPH complies with all federal statutes and regulations relating to nondiscrimination. MDPH does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, contracted providers, and provision of services. MDPH is committed to providing an inclusive and welcoming environment for all staff, clients, volunteers, subcontractors, vendors, providers, and clients.

Performance Measures

MDPH commits to documenting, storing, and reporting on performance using the full set of uniform measures to be provided by ACF.

Federally led Evaluation

As noted above, MDPH assures that the state and its sub-awardees, including MDESE, commits to accept and fully participate in all aspects of a national PREP evaluation if selected. All evaluation protocols established by ACF and conducted by its designee contractors will be adhered to. MDPH is not proposing a local evaluation.

Exhibit 2



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Devan Cody
Massachusetts Dept. of Public Health
250 Washington Street
Boston, MA, 02108

RE: State Personal Responsibility Education Program 1601MAPREP

Dear Devan Cody:

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual
 - Handouts

- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit 3



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501MAPREP
FAIN# 2501MAPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

PUBLIC HEALTH, MASSACHUSETTS
DEPARTMENT OF
250 Washington Street

BOSTON, MASSACHUSETTS 02108 4603

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1046002284B7

5. Data Universal Numbering System (DUNS)

878298900

6. Recipient's Unique Entity Identifier

DLKMR1QVDX34

7. Project Director or Principal Investigator

Jill Clark

jill.clark@state.ma.us

617-624-6067

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information

11. Award Number

2501MAPREP

12. Unique Federal Award Identification Number (FAIN)

2501MAPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award

including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$631,855.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$1,004,945.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer - Signature

David Lee

Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501MAPREP
FAIN# 2501MAPREP
Federal Award Date: August 6, 2025

Recipient Information

PUBLIC HEALTH, MASSACHUSETTS DEPARTMENT OF
250 Washington Street
BOSTON, MASSACHUSETTS 02108 4603

Employer Identification Number (EIN): 1046002284B7

Data Universal Numbering System (DUNS): 878298900

Recipient's Unique Entity Identifier: DLKMR1QVDX34

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant Award to Date</u>	<u>Document Number</u>	<u>Funding Type</u>
75-X-1512	2025,G99SU25	\$1,004,945.00	\$631,855.00	\$1,004,945.00	2501MAPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of -effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters .

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit 4



Tuesday, August 26, 2025

Ms. Jill Clark
Massachusetts Department of Public Health
250 Washington Street
Boston, MA 02108

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (2301MAPREP), 2024 (#2401MAPREP), and 2025 (#2501MAPREP).

Dear Ms. Clark:

On April 14, 2025, the Administration for Children and Families (ACF) requested that the Commonwealth of Massachusetts provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing Massachusetts's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from Massachusetts's PREP curricula and program materials:¹

Making Proud Choices! 5th edition

- Page 36: "Asking participants to tell you their pronouns is a way of creating a safe space for transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns

¹ ACF initiated a medical accuracy review to determine if Massachusetts's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, Massachusetts will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

and thus “outing” themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or zir. Pronouns don’t always line up with what observers might expect based on a person’s perceived biological sex. The simple act of requesting pronouns sends the message that transgender and gender nonconforming youth are welcome and respected in the group.”

- Pages 39-40: “**Gender** refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel. Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another.

Gender identity is peoples’ inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn’t fit these labels. It may be the same as (cisgender) or different from (transgender) the sex they were assigned at birth. Gender identity is unique for each person.

Gender expression is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics.”

Rights, Respect, Responsibilities (the 3Rs), Middle School Curriculum

- Pages 2-3: “Being Respectful about Gender Identity: Pronouns and Practice!”

A NOTE ABOUT LANGUAGE:

Language is extremely important. It is one way you can be explicitly inclusive around often underrepresented and not as commonly acknowledged sexual orientations and gender identities. We’ve intentionally been very thoughtful about our language throughout this curriculum. You may notice language that seems less familiar, for example, using the pronoun ‘they’ instead of ‘her’ or ‘him’, and simply referring to the body parts and processes we are teaching about rather than unnecessarily gendering them. We have also explicitly included scenarios and role plays that use a variety of names typically coded to certain genders, as well as ones that are not as readily coded to assumptions about gender. We have also used a variety of gendered and gender-neutral pronouns and names to be sure we are actively including various gender identities, sexual orientations, and relationships in our activities and discussions. This commitment to inclusiveness across our lessons is aimed at building new habits within our classrooms related to actively and more seamlessly representing a broader range of genders, orientations, and lived experiences.

***NOTE TO THE TEACHER:** Being prepared to teach about gender identity and expression may be new skills for some teachers. Preparation can include checking out some of the links below, talking with colleagues who have taught these topics before, and taking a minute to practice new phrases or use of*

pronouns. You have transgender young people in your classes, you always have! Your preparation to actively acknowledge and include them can be lifesaving!

- **I Think I Might Be Transgender, Advocates for Youth** – Written by transgender youth, this pamphlet provides answers for young people who find that the gender to which they were born, or assigned at birth, does not fit them.
- **Developing LGBTQ-Inclusive Classroom Resources, GLSEN** – Educator guide on creating an inclusive curriculum, responding to anti-LGBTQ behavior and implementing social emotional learning in the classroom.
- **Framework for Gender-Inclusive Schools, Gender Spectrum** – Background on the four entry points for the intentional development of gender-inclusive school settings and resources to approach each.
- **Schools in Transition: A Guide for Supporting Transgender Students in K-12 Schools, ACLU** – Handbook on providing safe environments for transgender high school students that is targeted toward administrators, teachers and parents.
- **Pronoun Guide, GLSEN** – Guide for members of the school community to learn how to use people’s correct pronouns.
- **Gender Support Checklist for Transgender and Non-Binary Students, Welcoming Schools** – Set of questions for educators to confirm they have the answers and resources necessary to best support gender-nonconforming students.”

The “purpose” of a PREP grant award is for states to “carry out personal responsibility education programs consistent with this subsection.” 42 U.S.C. § 713(b)(1). The statute defines PREP as “a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C).” 42 U.S.C. § 713(b)(2). The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).²

The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: “(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.”

associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency's authority to administer the program consistent with the authorizing legislation as enacted by Congress. Massachusetts' current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs Massachusetts to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute; we are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Sierra Baker, sierra.baker@acf.hhs.gov.

Massachusetts is directed to remove these and all similar language throughout their curricula and program materials. Should Massachusetts fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

**DECLARATION OF DR. SARAH LYON-
CALLO**

DECLARATION OF DR. SARAH LYON-CALLO

I, DR. SARAH LYON-CALLO, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of Michigan. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Senior Deputy Director for the Public Health Administration and State Epidemiologist at the Michigan Department of Health and Human Services (MDHHS).

3. I am responsible for overseeing the Public Health Administration, which promotes and protects the health of the population of the State of Michigan as a whole through surveillance and response to health issues, prevention of illness and injury, and improvements in access to care.

4. I have personal knowledge of the matters set forth below or have knowledge of the matters based on my review of the information and records gathered by my staff. I would testify to the following if called as a witness.

5. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive).

PREP Grants in Michigan

6. In Michigan, MDHHS supports comprehensive, evidence-based educational programming to reduce pregnancy and HIV and other sexually transmitted infections (STIs). The

PREP funding supports programming at 25 school buildings and 8 community-based organizations. Across the State, 3,378 youth are served by the programs we implement with PREP funding. The goal of PREP is to reduce the rates of teen pregnancy, STIs, and HIV by delaying the initiation of sex among sexually inexperienced youth and increasing condom/contraceptive use among sexually active youth. PREP funding prepares adolescents for the successful transition to adulthood, builds skills for dealing with peer pressure, promotes positive youth development, and empowers them to make informed decisions related to sexual health and pregnancy prevention. PREP funding is integral to the Department's overall mission to provide services and administer programs to improve the health, safety and prosperity of the residents of the State of Michigan.

7. In applying for PREP grants, MDHHS has complied with the program's application requirements, which include assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and targeted towards high-risk youth. The programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" as described in 42 U.S.C. § 713(b)(2)(C). In its grant applications, MDHHS also addresses how Michigan uses positive youth development principles when offering trauma-informed prevention programming. MDHHS last provided certification to ACF of Michigan's compliance with these requirements on November 21, 2024. That certification is attached as Exhibit A.

8. In 2016, Michigan submitted a PREP grant application in response to ACF's Funding Opportunity Announcement (FOA). Since that time, Michigan has submitted a letter of intent packet to re-authorize PREP grants each year. ACF extends funding to grantees for three-

year grant terms. Michigan applies for a new grant each year, resulting in overlapping awards. Michigan has received these funds since 2010.

9. ACF has issued to MDHHS three currently active awards covering the period from October 1, 2022, through September 30, 2027.

- For the period from October 1, 2022 through September 30, 2025, ACF awarded \$1,445,632 in PREP funding to Michigan.
- For the period from October 1, 2023 through September 30, 2026, ACF awarded \$1,542,023 in PREP funding to Michigan.
- For the period from October 1, 2024 through September 30, 2027, ACF awarded \$1,502,845 in PREP funding to Michigan.

MDHHS is currently operating using fiscal year 2023 funds and has not yet drawn down 2024 or 2025 funds.

10. ACF disburses PREP funding as reimbursements requested by MDHHS. MDHHS expects to request its next grant disbursement in early October 2025. Reimbursable expenses are accrued throughout the year, and MDHHS is not presently awaiting the disbursement of funds from ACF for previously submitted requests.

11. Michigan has well-established partnerships with schools and local organizations to administer these funds. Since October 1, 2019, Michigan has partnered with 13 organizations to design and implement science-based sex education curriculum and adulthood preparation subjects for youth ages 12-19 in geographical areas within Michigan with higher rates of teen pregnancy.

Communications from Federal Government

12. On or about April 14, 2025, MDHHS received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that

ACF was performing a “medical accuracy review” and requesting submission of “any current curricula and programmatic materials” related to state PREP grants. FYSB stated that the “purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete.” That letter is attached as Exhibit B.

13. As requested, MDHHS submitted all PREP curricula and materials on April 21, 2025. This included the curriculum, facilitator guides, and handouts.

14. On August 6, 2025, MDHHS received a Notice of Award (NOA) describing the financial information associated with Michigan’s PREP grant award funds. The NOA states, “[t]he use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one’s sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.” The NOA is attached as Exhibit C.

15. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards and award modifications that add funding. The Supplemental T&Cs prohibit grant

recipients from including so-called “gender ideology” in PREP-funded programs and services. Per ACF’s notice, these Supplemental T&Cs are effective immediately.

16. Per the August 6, 2025 NOA and the Supplemental T&Cs, the “gender ideology” terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. MDHHS has not used any funds awarded under the August 6, 2025 NOA and thus has not accepted the “gender ideology” term in the NOA or the Supplemental T&Cs.

17. On August 26, 2025, MDHHS received via email another letter from ACF (the PREP Directive) stating that Michigan’s “current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified” because Michigan’s curriculum and materials include “gender ideology.” The identified content, ACF claims, is “outside of the scope of PREP’s authorizing statute . . . and all references to it must be removed from [the] PREP curricula and program materials.” ACF further instructs MDHHS “to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.” ACF asserts that it may take “additional enforcement action,” and lists as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.” The letter demands compliance within 60 days, or by October 27, 2025. That letter is attached as Exhibit D.

Harms to Michigan

18. Michigan is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive.

19. The NOA, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency’s ability to plan for the future is severely

negatively impacted. For example, our PREP grant covers the salary of 1.38 fulltime employees at MDHHS. With the uncertainty of the PREP grant's continuation past October 27, 2025, our agency is being forced to contemplate reducing or terminating these valuable employees' positions. Additionally, 22 program staff and facilitators across our partner organizations will also be at risk of losing their positions given the uncertainty of the PREP grant's continuation.

20. Further, the threat to our state's federal financial assistance for failure to remove content concerning "gender ideology" puts at risk \$3,398,430 in PREP funding.

21. The impact of a disruption in funds would be devastating to the program. Given my experience, without the continued and uninterrupted funding of PREP grants, MDHHS and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in Michigan, especially high-risk youth, will suffer.

22. Loss of PREP funding would threaten Michigan's historic reductions in teen pregnancy, as the program is central to the state's prevention strategy. Cutting these funds would disrupt statewide collaboration and professional development, resulting in staff reductions at both state and local levels. Teen pregnancy also has economic consequences, including higher healthcare costs, reduced productivity, and increased reliance on social services.

23. Without funding, agencies could not sustain programming, leading to job losses for health educators and the removal of critical services for youth. The greatest impact would fall on the young people themselves. PREP provides not only high-quality sex education but also youth development programming, including adulthood preparation and youth advisory councils. Each year, over 3,000 youth in high-need areas benefit from instruction, mentorship, and supportive

relationships with trusted adults. Parents, guardians, and community members also lose valuable resources and guidance.

24. Removing content related to gender identity would especially harm LGBT students. Michigan's 2023 Youth Risk Behavior Survey shows over 70% of LGBT youth reported feeling sad or hopeless for two or more weeks. They are 2.6 times more likely to consider suicide, 3.1 times more likely to attempt it, and twice as likely to require medical attention. LGBT students also face higher rates of bullying. All Michigan students deserve medically accurate, age-appropriate, inclusive, and culturally relevant programming—the kind PREP provides.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 25, 2025, at Lansing, Michigan.

s/ Dr. Sarah Lyon-Callo

DR. SARAH LYON-CALLO
Senior Deputy Director and State
Epidemiologist
Michigan Department of Health and Human
Services

Exhibit A



STATE OF MICHIGAN

DEPARTMENT OF HEALTH AND HUMAN SERVICES

LANSING

GRETCHEN WHITMER
GOVERNORELIZABETH HERTEL
DIRECTOR

November 18, 2024

Nakia Martin-Wright
Adolescent Pregnancy Prevention Program
Family and Youth Services Bureau
Administration for Children and Families
U.S. Department of Health and Human Services
Switzer Building
330 C Street SW
Washington, DC 20201

Dear Nakia Martin-Wright:

Subject: *State PREP Grant 2501MIPREP*

As the Authorized Organizational Representative for the Michigan Department of Health and Human Services (MDHHS), I am pleased to submit this request for **\$1,502,845** in FY 2025 continuation funding for Taking Pride in Prevention (TPIP), Michigan's State Personal Responsibility Education Program from the U.S. Department of Health and Human Services, Administration for Children and Families, Family and Youth Services Bureau.

This funding will enable MDHHS to continue the important comprehensive adolescent pregnancy prevention and adulthood preparation programming that has occurred to date in Michigan and build a framework for future initiatives for adolescents and young adults.

In addition to this letter, you will find the following required documents have been submitted in OLDC: SF-424M, SF-424A, TPIP budget detail and narrative, and TPIP state plan. Should you have any questions, Kara Anderson, Teen Pregnancy Prevention Coordinator, is the designated project lead for TPIP and can be reached at 517-512-0279 or andersonk10@michigan.gov.

We look forward to continuing our work with the U.S. Department of Health and Human Services, Administration for Children and Families, Family and Youth Services Bureau, as we provide adolescent pregnancy prevention and adulthood preparation education to adolescents and young adults in our state.


Sincerely,

A handwritten signature in dark ink, appearing to read "Daniel Lance".

Daniel Lance
Centralized Grants Management Section

Application SF-424M**Program Name:** Personal Responsibility Education Program**Grantee Name:** MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES**Report Name:** Application SF-424M**Report Period:** 10/01/2024 to 09/30/2025**Report Status:** Submitted

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Administration for Children and Families		Form Approved Control No: 4040-0020 Expires: 02/08/2026 Version 01.2	
APPLICATION FOR FEDERAL ASSISTANCE SF - 424 - MANDATORY			
* 1.a. Type of Submission: <input type="radio"/> Plan <input checked="" type="radio"/> Funding Request	* 1.b. Frequency: <input checked="" type="radio"/> Annual <input type="radio"/> Other * Other (Specify)	* 1.c. Consolidated Application/Plan/Funding Request? Explanation:	* 1.d. Version: <input checked="" type="radio"/> Initial <input type="radio"/> Resubmission <input type="radio"/> Revision <input type="radio"/> Update
		2. Date Received:	State Use Only:
		3. Applicant Identifier:	
		4a. Federal Entity Identifier:	
		4b. Federal Award Identifier:	5. Date Received By State:
			6. State Application Identifier:
7. APPLICANT INFORMATION			
* a. Legal Name: MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES			
* b. Employer/Taxpayer Identification Number (EIN/TIN):	1386000134J1		* c. Organizational UEI: C2AQVDYYUAS7
* d. Address:			
* Street 1:	Federal Reporting Section	* Street 2:	235 S Grand Av., Suite 800
* City:	LANSING	* County:	INGHAM
* State:	MI	* Province:	
* Country:	United States	* Zip / Postal Code:	48933
e. Organizational Unit:			
Department Name:		Division Name:	
f. Name and contact information of person to be contacted on matters involving this application:			
Prefix:	* First Name: Kara	Middle Name:	* Last Name: Anderson
Suffix:	Title: Teen Pregnancy Prevention Coordinator	Organizational Affiliation:	
* Telephone Number: (517) 512-0279	Fax Number:	* Email: andersonk10@michigan.gov	
* 8a. TYPE OF APPLICANT: A: State Government			
b. Additional Description:			
* 9. Name of Federal Agency: Administration for Children and Families, Family and Youth Services Bureau			
		Catalog of Federal Domestic	CFDA Title:

		Assistance Number:			
10. CFDA Numbers and Titles 1		93.092		State Personal Responsibility Education Program (State PREP)	
11. Descriptive Title of Applicant's Project Taking Pride in Prevention (TPIP)					
12. Areas Affected by Funding:					
13. CONGRESSIONAL DISTRICTS OF:					
* a. Applicant 07			b. Program/Project: MI-ALL		
Attach an additional list of Program/Project Congressional Districts if needed.					
14. FUNDING PERIOD:			15. ESTIMATED FUNDING:		
a. Start Date: 10/01/2024		b. End Date: 09/30/2027		* a. Federal (\$): \$0	b. Match (\$): \$0
* 16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?					
a. This submission was made available to the State under the Executive Order 12372					
Process for Review on :					
b. Program is subject to E.O. 12372 but has not been selected by State for review.					
c. Program is not covered by E.O. 12372.					
* 17. Is The Applicant Delinquent On Any Federal Debt?					
<input type="radio"/> YES <input checked="" type="radio"/> NO					
Explanation:					
18. By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)					
**I Agree <input checked="" type="checkbox"/>					
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.					
18a. Typed or Printed Name and Title of Authorized Certifying Official Daniel Lance			18c. Telephone (area code, number and extension)		
			18d. Email Address mdhhs-grants@michigan.gov		
18b. Signature of Authorized Certifying Official 			18e. Date Report Submitted (Month, Day, Year) 11/21/2024		
Attach supporting documents as specified in agency instructions.					

BUDGET INFORMATION - Non-Construction ProgramsOMB Number: 4040-0006
Expiration Date: 02/28/2025**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. State Personal Responsibility Education Program (State PREP)	93.092	\$	\$	\$ 1,502,845.00	\$	\$ 1,502,845.00
2. Local Match (TPIP Subawardees)					236,250.00	236,250.00
3.						
4.						
5. Totals		\$	\$	\$ 1,502,845.00	\$ 236,250.00	\$ 1,739,095.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	State Personal Responsibility Education Program (State PREP)	Local Match (TPIP Subawardees)			
a. Personnel	\$ 147,315.00	\$	\$	\$	\$ 147,315.00
b. Fringe Benefits	88,036.00				88,036.00
c. Travel	8,628.00				8,628.00
d. Equipment	0.00				0.00
e. Supplies	600.00				600.00
f. Contractual	1,180,000.00	236,250.00			1,416,250.00
g. Construction	0.00				0.00
h. Other	6,013.00				6,013.00
i. Total Direct Charges (sum of 6a-6h)	1,430,592.00	236,250.00			\$ 1,666,842.00
j. Indirect Charges	72,253.00				\$ 72,253.00
k. TOTALS (sum of 6i and 6j)	\$ 1,502,845.00	\$ 236,250.00	\$	\$	\$ 1,739,095.00
7. Program Income	\$	\$	\$	\$	\$

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Prescribed by OMB (Circular A -102) Page 1A

SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	Local Match (TPIP Subawardees)	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text" value="236,250.00"/>	\$ <input type="text" value="236,250.00"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12. TOTAL (sum of lines 8-11)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text" value="236,250.00"/>	\$ <input type="text" value="236,250.00"/>

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ <input type="text" value="1,502,845.00"/>	\$ <input type="text" value="375,711.25"/>	\$ <input type="text" value="375,711.25"/>	\$ <input type="text" value="375,711.25"/>	\$ <input type="text" value="375,711.25"/>
14. Non-Federal	\$ <input type="text" value="236,250.00"/>	<input type="text" value="59,062.50"/>	<input type="text" value="59,062.50"/>	<input type="text" value="59,062.50"/>	<input type="text" value="59,062.50"/>
15. TOTAL (sum of lines 13 and 14)	\$ <input type="text" value="1,739,095.00"/>	\$ <input type="text" value="434,773.75"/>	\$ <input type="text" value="434,773.75"/>	\$ <input type="text" value="434,773.75"/>	\$ <input type="text" value="434,773.75"/>

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b)First	(c) Second	(d) Third	(e) Fourth
16.	<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>
17.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
18.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
19.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
20. TOTAL (sum of lines 16 - 19)		\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges: <input type="text" value="\$1,430,592"/>	22. Indirect Charges: <input type="text" value="\$72,253"/>
23. Remarks: <input type="text" value="FY 2025 State PREP - Michigan"/>	

Michigan Department of Health and Human Services

TPIP Budget Detail and Narrative

October 1, 2024 - September 30, 2027

(FFY 2025 Funds)

			PREP Grant	State Match
A. Personnel (Salaries & Wages)	Yearly	FTE		
ASH Section Manager - Karen Krabill Yoder	\$131,736	0.175	\$23,054	\$0
TPIP Project Director - Kara Anderson	\$104,734	1.00	\$104,734	\$0
CASH Epidemiologist - Lindsay Townes	\$97,635	0.20	\$19,527	\$0
Total Personnel:	\$334,105	1.38	\$147,315	\$0
B. Fringe Benefits	Yearly	FTE		
ASH Section Manager - Karen Krabill Yoder	\$65,868	0.175	\$11,527	\$0
TPIP Project Director - Kara Anderson	\$62,840	1.00	\$62,840	\$0
CASH Epidemiologist - Lindsay Townes	\$68,345	0.20	\$13,669	\$0
Total Fringe Benefits:	\$197,053	1.38	\$88,036	\$0
Total Personnel + Fringe Benefits:			\$235,351	\$0
C. Travel				
<u>In-State/Local</u>	<i>\$0.44 /mile</i>			
Mileage	<i>100 mile/mo</i>		\$528	\$0
Per Diems	<i>\$150 /day</i>		\$1,500	\$0
<i>In-State Subtotal</i>			\$2,028	\$0
<u>Out-of-State/National</u>				
National Grantee Meeting	<i>\$1,800 ea.</i>		\$3,600	\$0
PREP Topical Training	<i>\$1,500 ea.</i>		\$3,000	\$0
<i>Out-of-State Subtotal</i>			\$6,600	\$0
Total Travel:			\$8,628	\$0
D. Equipment				
Total Equipment:			\$0	\$0
E. Supplies				
General Office Supplies	<i>\$50 /month</i>		\$600	\$0
Copier Lease	<i>\$0 /year</i>		\$0	\$0
Total Supplies:			\$600	\$0
F. Contractual				
MOASH			\$85,000	\$0
MPHI			\$95,000	\$0
PAFHK			\$5,000	\$0
DMS			\$50,000	\$0
Community Subawardees	<i>\$105,000 per comm.</i>		\$945,000	\$236,250
Total Contractual:			\$1,180,000	\$236,250
G. Construction				
Total Construction:			\$0	\$0
H. Other				
Postage	<i>\$0 /month</i>		\$0	\$0
Printing			\$0	\$0
Conference Registrations			\$800	\$0
Media			\$0	\$0
Other			\$5,213	\$0
Total Other:			\$6,013	\$0

Michigan Department of Health and Human Services

TPIP Budget Detail and Narrative

October 1, 2024 - September 30, 2027

(FFY 2025 Funds)

		PREP Grant	State Match
I. Direct Costs		\$1,430,592	\$236,250
J. Indirect Costs	30.70% salary/fringe	\$72,253	
PREP Grant Total:		\$1,502,845	
State Match Total:			\$236,250
TPIP PROJECT TOTAL:		\$1,739,095	

Michigan Department of Health and Human Services

TPIP Budget Detail and Narrative

October 1, 2024 - September 30, 2027

(FFY 2025 Funds)

FFY 2025 Funds)	PREP Grant	State Match															
A. PERSONNEL (SALARIES & WAGES)	\$147,315	\$0															
Salaries and wages for key program staff, including TPIP Project Director, ASH Section Manager, and CASH Epidemiologist.																	
<table><tr><th>Position Title and Name</th><th>Yearly Salary</th><th>FTE</th></tr><tr><td>ASH Section Manager - Karen Krabill Yoder</td><td>\$131,736</td><td>0.175</td></tr><tr><td>TPIP Project Director - Kara Anderson</td><td>\$104,734</td><td>1.00</td></tr><tr><td>CASH Epidemiologist - Lindsay Townes</td><td>\$97,635</td><td>0.20</td></tr></table>	Position Title and Name	Yearly Salary	FTE	ASH Section Manager - Karen Krabill Yoder	\$131,736	0.175	TPIP Project Director - Kara Anderson	\$104,734	1.00	CASH Epidemiologist - Lindsay Townes	\$97,635	0.20	<table><tr><td>\$23,054</td></tr><tr><td>\$104,734</td></tr><tr><td>\$19,527</td></tr></table>	\$23,054	\$104,734	\$19,527	
Position Title and Name	Yearly Salary	FTE															
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TPIP Project Director - Kara Anderson	\$104,734	1.00															
CASH Epidemiologist - Lindsay Townes	\$97,635	0.20															
\$23,054																	
\$104,734																	
\$19,527																	
B. FRINGE BENEFITS	\$88,036	\$0															
Fringe benefits applicable to direct salaries and wages are treated as direct costs. Current rates range from 50%-70%. Fringe benefits are percentages of salary that include retirement, disability insurance, health, life, dental and vision insurance.																	
<table><tr><th>Position Title and Name</th><th>Yearly Fringe</th><th>FTE</th></tr><tr><td>ASH Section Manager - Karen Krabill Yoder</td><td>\$65,868</td><td>0.175</td></tr><tr><td>TPIP Project Director - Kara Anderson</td><td>\$62,840</td><td>1.00</td></tr><tr><td>CASH Epidemiologist - Lindsay Townes</td><td>\$68,345</td><td>0.20</td></tr></table>	Position Title and Name	Yearly Fringe	FTE	ASH Section Manager - Karen Krabill Yoder	\$65,868	0.175	TPIP Project Director - Kara Anderson	\$62,840	1.00	CASH Epidemiologist - Lindsay Townes	\$68,345	0.20	<table><tr><td>\$11,527</td></tr><tr><td>\$62,840</td></tr><tr><td>\$13,669</td></tr></table>	\$11,527	\$62,840	\$13,669	
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CASH Epidemiologist - Lindsay Townes	\$68,345	0.20															
\$11,527																	
\$62,840																	
\$13,669																	
C. TRAVEL	\$8,628	\$0															
<u>In-State Travel</u>	\$2,028																
In-state travel is estimated for the TPIP Project Director. Michigan mileage reimbursement is .44 cents per mile.																	
Estimated mileage is 100 miles monthly x 1.0 FTE x 12 months x .44 cents.	\$528																
Per diems for TPIP Project Director to attend in-state conferences, trainings and meetings at the rate of \$150 per day for 10 days.	\$1,500																
<u>Out-of-State Travel</u>	\$6,600																
Out-of-state travel for TPIP Project Director and ASH Section Manager to attend ACF required grantee meetings.																	
Estimated travel costs for TPIP Project Director and ASH Section Manager to attend the national grantee meeting estimated at \$1,800 to cover airfare, lodging, meals, ground transportation, etc.	\$3,600																
Estimated travel costs for TPIP Project Director and ASH Section Manager to attend a PREP topical training estimated at \$1,500 to cover airfare, lodging, meals, ground transportation, etc.	\$3,000																
D. EQUIPMENT	\$0	\$0															
E. SUPPLIES	\$600	\$0															
<u>General Office Supplies</u>	\$600																
For general office supplies (pens, paper, state forms, etc.) and computer software supplies (software, printer toner, fax toner, etc.) used by TPIP project staff to carry out daily grant activities. It is estimated to cost \$50 per month x 12 months.																	
<u>Copier Lease</u>	\$0																
For shared portion of yearly copier lease.																	

Michigan Department of Health and Human Services**TPIP Budget Detail and Narrative****October 1, 2024 - September 30, 2027****(FFY 2025 Funds)**

	PREP Grant	State Match
F. CONTRACTUAL	\$1,180,000	\$236,250
<u>Michigan Organization on Adolescent Sexual Health</u> MOASH will provide training (Institutes) and professional development for TPIP funded community subawardees, as well as monitor TOP implementation as a TOP replication partner. Costs include: salary and fringe for training coordinator, project assistant and executive director; travel; supplies/materials; printing; training/speaker costs; and other associated costs.	\$85,000	
<u>Michigan Public Health Institute</u> MPH will provide evaluation oversight and support for TPIP funded community subawardees. Costs include: salary and fringe for project director and research assistants; travel; supplies/materials; printing; data entry system management; evaluation reports; evaluation technical assistance; and other associated costs.	\$95,000	
<u>Parent Action for Healthy Kids</u> PAFHK will provide family and community engagement professional development opportunities and technical assistance for TPIP funded community subawardees. Costs include: salary and fringe for coordinator; travel; supplies/materials; and other associated costs.	\$5,000	
<u>Diversified Management Services</u> DMS will provide coordination and management of the statewide Child, Adolescent and School Health (CASH) Conference and webinars. Costs include: salary and fringe for conference coordinator; support staff stipends; travel; graphic design; supplies/materials; conference/speaker costs; and other associated costs.	\$50,000	
<u>Community Subawardees</u> Funding for 9 communities (\$105,000/ea.) to implement an evidence-based teen pregnancy prevention program to youth at highest need in their communities. Required match of 25% of allocation for each subawardee.	\$945,000	\$236,250
G. CONSTRUCTION	\$0	\$0
H. OTHER	\$6,013	\$0
<u>Postage</u> General postage costs for project related mailings.	\$0	
<u>Printing</u> Formatting and printing costs for project reports and publications.	\$0	
<u>Conference Registrations</u> Conference and training registration costs for TPIP Project Director and ASH Section Manager.	\$800	
<u>Media</u> This item supports the airing of a statewide youth-focused media campaign.	\$0	
<u>Other</u> Special TPIP projects or trainings yet to be determined.	\$5,213	

Michigan Department of Health and Human Services

TPIP Budget Detail and Narrative

October 1, 2024 - September 30, 2027

(FFY 2025 Funds)

FFY 2025 Funds)		PREP Grant	State Match
I. DIRECT COSTS		\$1,430,592	\$236,250
Total for all categories A-H that is budgeted for program costs before indirect.			
J. INDIRECT COSTS		\$72,253	\$0
The current indirect cost rate agreement is 30.7% and computed on staff salary and fringe.			
<div>Salary & Fringe\$235,351</div> <div>30.7% Indirect Rate0.3070</div> <div>Total Indirect Cost\$72,253</div>			
PREP Grant Total:		\$1,502,845	
Local Match Total:			\$236,250
TPIP PROJECT TOTAL:		\$1,739,095	

**Michigan Department of Health and Human Services
Taking Pride in Prevention (TPIP)
FY 2025 State Plan**

Subaward plan

The current TPIP subawardees completed a non-competitive renewal application in the summer of 2024 for the period of October 1, 2024-September 30, 2025. All were successfully awarded funding to continue their TPIP programming in FY 2025. The current TPIP grant cycle began in FY 2020.

Target population

The target population for the TPIP program will continue to be youth 12-19 in high need geographical areas as evidenced by the highest average teen birth rate for a five-year period. This grant cycle is focused on cities, however, some subawardees have expanded their programming to other areas of their high need counties.

Anticipated number of youth served per implementation site

In FY 2024, there was a total of 133 cohorts and 3,378 youth served across all subawardees. 83% of youth served were in-school (2,778), 3% were virtual (114), 11% were community-based (353) and 3% were after-school (107). 60% of participants completed at least 75% of the program. For FY 2025, we expect to see similar, if not higher, total numbers of youth served in each implementation setting.

Proposed curriculum

TPIP subawardees will continue to implement the same curricula they have been since the current grant cycle began in FY 2020. The three curricula currently implemented by TPIP are Making Proud Choices, Michigan Model for Health-Healthy and Responsible Relationships and Teen Outreach Program.

Plan to address at least three Adulthood Preparation Subjects (APS)

The TPIP program will continue to address the same three adulthood preparation subjects as originally selected (adolescent development, healthy relationships and parent-child communication). The three APS will continue to be addressed in the curriculum lessons, curriculum supplemental lessons or by original content developed by the subawardee or a partner organization.

Exhibit B



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Dan Lance
Michigan Department of Health and Human Services
235 S. Grand Ave.,
Suite 800
Lansing, MI, 48933

RE: State Personal Responsibility Education Program 1601MIPREP

Dear Dan Lance:

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual

- Handouts
- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit C



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501MIPREP
FAIN# 2501MIPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

MICHIGAN DEPARTMENT OF HEALTH
AND HUMAN SERVICES
Federal Reporting Section
235 S Grand Av., Suite 800

LANSING, MICHIGAN 48933

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1386000134J1

5. Data Universal Numbering System (DUNS)

113704139

6. Recipient's Unique Entity Identifier

C2AQVDYYUAS7

7. Project Director or Principal Investigator

Kara Anderson

AndersonK10@michigan.gov

517-335-1158

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information

11. Award Number

2501MIPREP

12. Unique Federal Award Identification Number (FAIN)

2501MIPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$944,908.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$1,502,845.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501MIPREP

FAIN# 2501MIPREP

Federal Award Date: August 6, 2025

Recipient Information

MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES
Federal Reporting Section
235 S Grand Av., Suite 800
LANSING, MICHIGAN 48933

Employer Identification Number (EIN): 1386000134J1

Data Universal Numbering System (DUNS): 113704139

Recipient's Unique Entity Identifier: C2AQVDYYUAS7

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2025,G99SU25	\$1,502,845.00	\$944,908.00	\$1,502,845.00	2501MIPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit D



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, DC 20201 | www.acf.hhs.gov

Tuesday, August 26, 2025

Mr. Dan Lance
Michigan Department of Health and Human Services
235 South Grand Avenue, Suite 800
Lansing, MI 48933

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (#2301MIPREP), 2024 (#2401MIPREP), and 2025 (#2501MIPREP).

Dear Mr. Lance:

On April 14, 2025, the Administration for Children and Families (ACF) requested that Michigan provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing Michigan's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from Michigan's PREP curricula and program materials:¹

Making Proud Choices! 5th edition

- Page 36 (Module 1, Activity B Procedure): "Facilitator's Note: Asking participants to tell you their pronouns is a way of creating a safe space for

¹ ACF initiated a medical accuracy review to determine if Michigan's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, Michigan will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns and thus ‘outing’ themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or zir. Pronouns don’t always line up with what observers might expect based on a person’s perceived biological sex. The simple act of requesting pronouns sends the message that transgender and gender nonconforming youth are welcome and respected in the group.”

Pages 39-40 (Module 1, Activity C Procedure): “**Respect diversity:** Let’s keep in mind that there’s diversity in society and in the group. Individuals come from different family backgrounds, different racial and cultural groups and different living situations. Some young people have already had romantic relationships; others aren’t even thinking about it. Some have had sexual intercourse. Some have had sex because they choose to; other’s may have had sex against their will. Some may identify as gay, lesbian, bisexual or straight. Some may identify as male, female or transgender.

Young people may express themselves in ways that don’t conform with their biological sex. There are many ways that youth can express their gender identity. . .

Define terms related to diversity as needed.

I want to be sure everyone understands some of the terms we use when talking about diversity.

Gender refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel. Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another. **Gender identity** is peoples’ inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn’t fit these labels. It may be the same as (cisgender) or different from (transgender) the sex they were assigned at birth. Gender identity is unique for each person. **Gender expression** is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics.”

Teen Outreach Program (TOP), 2nd Edition, Facilitator Manual

- LAM-HW-F1, “Introduction to Reproductive Anatomy,” page 142: “Share:
 - During our discussion today, when we say ‘male’ and ‘female,’ we will be referring to biological sex, or people born with a penis or vulva.
 - Biological sex is different than gender. Gender is how people identify and express themselves.

- However someone identifies and expresses themselves, they should feel safe, respected and included in our TOP club.”
- LAM-HW-F1, Facilitator Resource, “Frequently Asked Questions,” page 148: **“Why would someone with a penis not identify as a boy/man? Why would someone with a vulva not identify as a girl/woman?”**
When we use body parts to describe people, we’re talking about ‘biological sex,’ or sex assigned at birth, which is different than gender. Gender is how people identify and express themselves. Transgender people are people whose gender identity is different from their biological sex or sex assigned at birth. Gender non-conforming and non-binary people are people whose gender identities are not exclusively either boy/man or girl/woman. However someone identifies, they should feel safe, respected and included in TOP.”
- LAM-HW-F6, “Abstinence and Expressing Affection,” page 196: “Share
 - When people think of sexuality, they often just think of sex.
 - However, sex is only one part of sexuality.
 - Sexuality also includes our bodies and how we feel about them, our desires and attractions to others, our relationships, our beliefs and values about sexuality, how we can love and affection and how we identity and express our gender.”

The “purpose” of a PREP grant award is for states to “carry out personal responsibility education programs consistent with this subsection.” 42 U.S.C. § 713(b)(1). The statute defines PREP as “a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C).” 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: “(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.”

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency's authority to administer the program consistent with the authorizing legislation as enacted by Congress. Michigan's current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs Michigan to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ Michigan is directed to remove these and all similar language throughout their curricula and program materials. Should Michigan fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Nakia Martin-Wright, nakia.martin-wright@acf.hhs.gov.

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF JEFFREY BROWN

DECLARATION OF JEFFREY BROWN

I, Jeffrey Brown, pursuant to 28 U.S.C. § 1746, hereby declare that the following is true and correct:

1. I am the Acting Commissioner of the New Jersey Department of Health ("NJDOH") and have been employed as the Acting Commissioner since April of 2025. I graduated Summa Cum Laude from Rutgers University in 2009. Prior to becoming Acting Commissioner of NJDOH, I worked extensively on the passage and implementation of the Affordable Care Act, and served in a variety of roles in health policy, including as the Vice President of Policy for the Hospital Alliance of New Jersey. I also served as the first Executive Director of the NJ Cannabis Regulatory Commission. Within NJDOH, I spent three years as Assistant Commissioner for Medical Marijuana and a year as Deputy Commissioner for Health Systems before my present appointment as Acting Commissioner.

2. The information in the statements set forth below were compiled through personal knowledge, through DOH personnel who have assisted in gathering this information from our agency, as well as information from experts outside of DOH provided to me.

3. As the Commissioner of NJDOH, I am focused on decreasing health disparities, improving maternal child health outcomes, and enhancing integrated care for behavioral health and substance use disorders. In my role as Commissioner, I strive to ensure that all people have access to resources that can keep them healthy and to evidence-based medical care when needed. I am proud to work with an interdisciplinary team of like-minded, driven individuals at NJDOH who are dedicated to improving the equity and health of New Jersey residents.

4. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notices of Award (NOAs) from the United States Department of Health and Human Services

(HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants and Sexual Risk Avoidance Education (SRAE) grants; the August 7, 2025 PREP and SRAE Supplemental Terms and Conditions (Supplemental T&Cs); and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive).

5. I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from the New Jersey Department of Health's records by others within the organization.

6. In New Jersey, our Department of Health supports comprehensive, evidence-based educational programming to reduce pregnancy, HIV and other sexually transmitted infections (STIs), and birth rates for youth in 64 school districts and eight community-based organizations. Across the State, approximately 2,000 youth every year are served by the programs we implement with PREP funding, and 1000 youth, 1000 parents, and 250 professionals are served by the programs we implement with SRAE funding. New Jersey's PREP grant has the greatest impact in areas of the state with the highest rates of teen pregnancy.

7. When applying for PREP and SRAE grants, the New Jersey Department of Health complied with the program's application requirements, which include providing assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and targeted towards high-risk youth. The programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" as described in 42 U.S.C. § 713(b)(2)(C). In its grant applications, the New Jersey Department of Health also addresses how New Jersey uses positive youth development principles when offering trauma-informed prevention programming. The New Jersey Department of Health

last provided certification to ACF of New Jersey's compliance with the requirements for PREP funding on November 27, 2024 through a Letter of Intent. That letter is attached as Exhibit NJ-1. The New Jersey Department of Health last provided certification to ACF of New Jersey's compliance with the requirements for SRAE funding on October 28 2024. See Exhibit NJ-2.

Federal Funding Relied on by the New Jersey Department of Health

8. In 2010 and every year thereafter, New Jersey submitted a PREP grant application in response to ACF's Funding Opportunity Announcement (FOA). Since that time, New Jersey has submitted a letter of intent packet to re-authorize PREP grants each year. ACF extends funding to grantees for three-year grant terms. New Jersey applies for a new grant each year, resulting in overlapping awards. New Jersey has received these funds since 2010.

9. ACF has issued to the New Jersey Department of Health three currently active PREP awards covering the period from October 1, 2022, through September 30, 2027. For the period from October 1, 2022 through September 30, 2025, ACF provided \$1,271,251 in PREP funding to New Jersey. For the period from October 1, 2023 through September 30, 2026, ACF provided \$1,356,014 in PREP funding to New Jersey. For the period from October 1, 2024 through September 30, 2027, ACF provided \$1,397,003 in PREP funding to New Jersey.

10. ACF disburses PREP funding as reimbursements requested by the New Jersey Department of Health. the New Jersey Department of Health expects to request its next grant disbursement on or around April 2026. New Jersey receives all PREP funding in a lump sum in or around April every year.

11. New Jersey has well-established partnerships with school districts and local organizations to administer these funds. Since 2010, New Jersey has partnered with school districts and community organizations to directly provide education to New Jersey high school students, as

well as providing professional development and training to teachers, and leadership opportunities to young people in the form of advisement on the curricula funded by PREP.

12. In 2018 and every year thereafter, New Jersey submitted an SRAE grant application in response to ACF's Funding Opportunity Announcement (FOA). Since that time, New Jersey has submitted a letter of intent packet to re-authorize SRAE grants each year. SRAE grants are awarded for overlapping two year terms.

13. ACF has issued to the New Jersey Department of Health two currently active SRAE awards covering the period from October 1, 2022, through September 30, 2026. For the period from October 1, 2023 through September 30, 2025, ACF provided \$1,087,881 in SRAE funding to New Jersey. For the period from October 1, 2024 through September 30, 2026, ACF provided \$1,303,470 in SRAE funding to New Jersey.

14. NJDOH administers SRAE funding through its well-established partnerships with schools and community organizations. Grantees use SRAE funding for direct education in schools, community-based settings, and juvenile justice and foster care settings.

Communications from Federal Government

15. On or about April 14, 2025, the New Jersey Department of Health received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that ACF was performing a "medical accuracy review" and requesting submission of "any current curricula and programmatic materials" related to state PREP grants. FYSB stated that the "purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete." That letter is attached as Exhibit NJ-3.

16. As requested, the New Jersey Department of Health submitted all PREP curricula and materials on April 17, 2025. This included all teacher- and student-facing materials associated with the Teen Outreach Program®, Teen PEP, Get Real and FLASH curricula.

17. On August 6, 2025, the New Jersey Department of Health received a Notice of Award (NOA) describing the financial information associated with New Jersey's PREP grant award funds (the "2025 PREP NOA"). The 2025 PREP NOA states, "[t]he use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions." In the Remarks section, the NOA states, "Recipients are prohibited from including gender ideology in any program or service that is funded with this award." The Terms and Conditions section states, in part, "[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405." The 2025 PREP NOA is attached as Exhibit NJ-4.

18. On August 6, 2025, NJDOH also received a Notice of Award (NOA) describing the financial information associated with New Jersey's SRAE grant award funds (the "2025 SRAE NOA"). The 2025 SRAE NOA states, "[t]he use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions." In the Remarks section, the NOA states, "Recipients are prohibited from including gender ideology in any program or service that is funded with this award." The Terms and Conditions section states, in part, "[t]he statutory authority for

the SRAE program under which this grant has been awarded, at 42 U.S.C. § 710, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405." The 2025 SRAE NOA is attached as Exhibit NJ-5.

19. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards, SRAE awards, and award modifications that add funding. The Supplemental T&Cs prohibit grant recipients from including so-called "gender ideology" in PREP-funded programs and services and SRAE-funded programs and services. Per ACF's notice, these Supplemental T&Cs are effective immediately.

20. Per the 2025 NOAs and the Supplemental T&Cs, the "gender ideology" terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. The New Jersey Department of Health has not used any funds awarded under the August 6, 2025, NOAs and thus has not accepted the "gender ideology" term in the NOA or the Supplemental T&Cs.

21. On August 26, 2025, the New Jersey Department of Health received via email another letter from ACF (the PREP Directive) stating that New Jersey's "current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified" because New Jersey's curriculum and materials include "gender ideology." The identified content, ACF claims, is "outside of the scope of PREP's authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials." ACF further

instructs New Jersey **“to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.”** ACF asserts that it may take “additional enforcement action,” and lists as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.” That letter is attached as Exhibit NJ-6.

Harms to New Jersey

22. New Jersey is currently and will continue to experience harm as a result of the NOAs, the Supplemental T&Cs, and the PREP Directive.

23. The NOAs, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency’s ability to plan for the future is severely negatively impacted. Our PREP grant covers the full salary of one employee, as well as a portion of the salaries of two further employees. Furthermore, our PREP grant covers over one million dollars in subawards to partner organizations, which implement PREP curricula for high-need populations across New Jersey. With the uncertainty of the PREP grant’s continuation past October 27, 2025, our agency is being forced to contemplate reducing or terminating these valuable employees’ positions.

24. NJDOH is also negatively impacted by the threat to SRAE funding. Our SRAE grant covers the full salary of one employee, as well as a portion of the salaries of two further employees. Our SRAE grant covers over one million dollars in subawards to three partner organizations to implement SRAE curricula across New Jersey. With the uncertainty of the SRAE grant’s continuation past October 27, 2025, our agency is being forced to contemplate reducing or terminating these valuable employees’ positions.


25. Further, the threat to our state's federal financial assistance for failure to remove content concerning what ACF calls "gender ideology" puts at risk \$2,753,017 in PREP funding, including \$1,356,014 awarded for Fiscal Year 2024 and \$1,397,003 awarded for Fiscal Year 2025. Furthermore, ACF's action put at risk \$1,303,470 in SRAE funding.

26. The impact of a disruption in funds would be devastating to the program. Without the continued and uninterrupted funding of PREP and SRAE grants, the New Jersey Department of Health and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in New Jersey, especially high-risk youth, will suffer.

27. PREP and SRAE funding in New Jersey are an integral part of our teen pregnancy prevention efforts. Communities in New Jersey with the highest rates of teen pregnancy are the ones that receive the most PREP and SRAE funding. In these communities, PREP and SRAE funds are used for parent education programs, pregnancy prevention efforts, and other life skills. Without PREP and SRAE funding, under-resourced communities in New Jersey will experience the greatest loss of funding and services.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 24, 2025, at Trenton, New Jersey.



JEFFREY BROWN
Acting Commissioner of the New Jersey
Department of Health

Exhibit 1



State of New Jersey
DEPARTMENT OF HEALTH

COMMUNICABLE DISEASE SERVICE

PO BOX 369

TRENTON, N.J. 08625-0369

www.nj.gov/health

PHILIP D. MURPHY
Governor

TAHESHA L. WAY
Lt. Governor

KAITLAN BASTON, MD, MSc, DFASAM
Commissioner

Ricky Richard
Adolescent Pregnancy Prevention Program
Family and Youth Services Bureau
Administration for Children and Families
U.S. Department of Health and Human Services
330 C St SW
Washington, DC 20201

November 27, 2024

Re: Personal Responsibility Education Program
CFDA: 93.092

Dear Ricky Richard,

New Jersey is pleased to apply for continuation of State PREP funding (FFY25) to educate young people on both abstinence and contraception to prevent pregnancy and STIs through the replication of evidence-based effective program models or elements of the effective program models proven to delay sexual activity, and/or increase condom or contraceptive use for sexually active youth. This letter of intent from New Jersey is requesting \$1,397,003 for the project. Enclosed with the letter are all required documents, including forms SF-424M and SF-424A.

Letters concerning this grant may be addressed to:

Jennie Blakney, Adolescent Health Coordinator
Child and Adolescent Health Program, Maternal and Child Health Services
Division of Family Health Services
NJ Department of Health
PO Box 364
Trenton, NJ 08625-0364

Sincerely,

Nancy Scotto Rosato

Nancy Scotto-Rosato
Assistant Commissioner
Family Health Services

Enc.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

1.a. Type of Submission:

- ☒ Application
☐ Plan
☐ Funding Request
☐ Other

Other (specify):

1.b. Frequency:

- ☒ Annual
☐ Quarterly
☐ Other

Other (specify):

1.d. Version:

- ☒ Initial ☐ Resubmission ☐ Revision ☐ Update

2. Date Received:

11/04/2024

STATE USE ONLY:

3. Applicant Identifier:

5. Date Received by State:

4a. Federal Entity Identifier:

6. State Application Identifier:

4b. Federal Award Identifier:

2501NJPREP

1.c. Consolidated Application/Plan/Funding Request?

Yes ☐ No ☒

7. APPLICANT INFORMATION:

a. Legal Name:

New Jersey Department of Health

b. Employer/Taxpayer Identification Number (EIN/TIN):

21-6000-928

c. UEI:

MQKPEU6D1BT5

d. Address:

Street1:

55 N. Willow St
4th Floor

Street2:

City:

Trenton

County / Parish:

Mercer

State:

NJ: New Jersey

Province:

Country:

USA: UNITED STATES

Zip / Postal Code:

08625-0364

e. Organizational Unit:

Department Name:

NJ Department of Health

Division Name:

Family Health Services

f. Name and contact information of person to be contacted on matters involving this submission:

Prefix:

Ms.

First Name:

Jennie

Middle Name:

Last Name:

Blakney

Suffix:

Title: Program Manager, Child and Adolescent Health

Organizational Affiliation:

Telephone Number: 609-913-5352

Fax Number:

Email: Jennie.Blakney@doh.nj.gov

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY**8a. TYPE OF APPLICANT:**

A: State Government

Other (specify):

b. Additional Description:

9. Name of Federal Agency:

Health and Human Services

10. Catalog of Federal Domestic Assistance Number:

93.092

CFDA Title:

State Personal Responsibility Education Program

11. Descriptive Title of Applicant's Project:

New Jersey PREP

12. Areas Affected by Funding:

NJ counties and municipalities with the highest teen birth rates

13. CONGRESSIONAL DISTRICTS OF:

a. Applicant:

State

b. Program/Project:

Attach an additional list of Program/Project Congressional Districts if needed.

PREP Cities and Congressional

Add Attachment

Delete Attachment

View Attachment

14. FUNDING PERIOD:

a. Start Date:

10/01/2024

b. End Date:

09/30/2027

15. ESTIMATED FUNDING:

a. Federal (\$):

1,397,003.00

b. Match (\$):

16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?☐ a. This submission was made available to the State under the Executive Order 12372 Process for review on:☐ b. Program is subject to E.O. 12372 but has not been selected by State for review.☒ c. Program is not covered by E.O. 12372.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY**17. Is The Applicant Delinquent On Any Federal Debt?**Yes ☐ No ☒

18. By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**

** I Agree ☒

** This list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Title:

Organizational Affiliation:

Telephone Number:

Fax Number:

Email:

Signature of Authorized Representative:

Date Signed:

Attach supporting documents as specified in agency instructions.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Consolidated Application/Plan/Funding Request Explanation:

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Applicant Federal Debt Delinquency Explanation:

BUDGET INFORMATION - Non-Construction ProgramsOMB Number: 4040-0006
Expiration Date: 02/28/2025**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. PREP	93.092	\$	\$	\$ 1,397,003.00	\$	\$ 1,397,003.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 1,397,003.00	\$	\$ 1,397,003.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	PREP				
a. Personnel	\$ 116,496.00	\$	\$	\$	\$ 116,496.00
b. Fringe Benefits	89,877.00				89,877.00
c. Travel	7,623.00				7,623.00
d. Equipment	11,421.00				11,421.00
e. Supplies					
f. Contractual	1,098,134.00				1,098,134.00
g. Construction					
h. Other	56,444.00				56,444.00
i. Total Direct Charges (sum of 6a-6h)	1,379,995.00				\$ 1,379,995.00
j. Indirect Charges	17,008.00				\$ 17,008.00
k. TOTALS (sum of 6i and 6j)	\$ 1,397,003.00	\$	\$	\$	\$ 1,397,003.00
7. Program Income	\$	\$	\$	\$	\$

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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	PREP	\$	\$	\$	\$
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)		\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 1,397,003.00	\$ 349,251.00	\$ 349,251.00	\$ 349,251.00	\$ 349,250.00
14. Non-Federal	\$				
15. TOTAL (sum of lines 13 and 14)	\$ 1,397,003.00	\$ 349,251.00	\$ 349,251.00	\$ 349,251.00	\$ 349,250.00

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b)First	(c) Second	(d) Third	(e) Fourth
16.	PREP	\$	\$	\$	\$
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)		\$	\$	\$	\$

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	1,379,995	22. Indirect Charges:	17,008
23. Remarks:			

New Jersey Department of Health
BUSINESS PROPOSAL FOR GRANTS AND COOPERATIVE AGREEMENTS

1.0 General

The New Jersey Department of Health maintains its accounting records in conformance with State and Federal policies and in compliance with OMB Federal Circular A-102. Our accounting system treats all costs consistently, and in most cases, direct costs are distributed to the program/activity cost center level as the transaction is incurred.

The Department of Health has a fiscal year that ends on June 30. This proposed budget, however, reflects costs for the period identified in the Request for Application (RFA) and the Department's accounting records will be maintained in such manner as to identify costs to the grant year. The accounting system will maintain accountability for this grant separately from all other fund sources.

The cost estimate provided in this proposal represents the best judgment of the anticipated costs to be incurred during the grant period and includes normal and inflationary cost increases as described.

1.1 Direct Labor (Personnel) **\$116,496**

The salary structure for employees of the State of New Jersey is based upon the New Jersey Compensation Plan, prepared by the New Jersey Civil Service Commission and adjusted annually based upon the negotiation of labor agreements.

<u>Position Title and Name</u>	<u>Annual Salary</u>	<u>%Time</u>	<u>Months</u>	<u>Amount</u>
Program Specialist- Jessica Shields	\$88,340	100%	12	\$88,340
Program Specialist – Vacant	\$56,253	33%	12	\$18,564
Grants Manager- Mark Opdyke	\$89,500	10%	12	<u>\$9,592</u>
				\$116,496

Annual increments equal to 5% of base salary are awarded to State employees based on satisfactory job performance determined by the employee's supervisor. This is awarded in nine annual increments on the anniversary of employment in a job title.

There will be no need to budget funds for the Deputy Commissioner's Office.

1.2 Labor Overhead **\$83,236**

Labor overhead is defined in this budget as non-salary costs incurred by an employer on behalf of an employee. These costs are treated consistently as a direct cost to each grant. The labor overhead is broken down into two categories: Fringe benefits and Social Security Taxes (F.I.C.A.).

- a. Fringe Benefits - the employer's share of pensions, health benefits, unemployment insurance, earned and unused lump-sum sick leave payments and prescription drugs and eyeglass programs. The rate is 69.5% of salary and wages and is negotiated annually by the New Jersey Department of Treasury with the U.S. Department of Health and Human Services. The current rate is approved for the period June 1, 2024 to June 30, 2025. This document will be updated when the new rate is provided by OMB. The current fringe rate is 63.8%.

$$\$116,496 \times .638 = \$74,324.$$

- b. Social Security Taxes (F.I.C.A.) - this rate is subject to Federal legislation. The cost is calculated based on a fixed percentage of salary and wages applied up to a fixed maximum annual salary of an employee. This cost has been calculated based on a calendar year (January 1-December 31) for each position identified as Direct Labor. The current Social Security Taxes (FICA) rate is 7.65%.

$$\$116,496 \times .0765 = \$8,912$$

1.3 Other Direct Costs **\$19,044**

Travel. The Department of Health is subject to the State of New Jersey travel regulations. The use of personal vehicles is allowed when State motor pool vehicles are not available. Reimbursement is provided at the rate of \$.35 per mile. The State re-evaluates this rate annually.

- a) Total Conferences & Conventions: \$6,900
 Funds are requested for two (2) PREP staff to attend the required professional conferences and one (1) staff to attend the two (2) required TAs during the grant year. Fees calculated based on the average costs from 2023-2024.
- | | |
|---|--------------------|
| Travel and ground transportation Conference | \$775 x 2 = \$1550 |
| Travel and ground transportation TA | \$500 x 2 = \$1000 |
| Hotel Conference | \$925 x 2 = \$1850 |
| Hotel TA | \$690 x 2 = \$1380 |
| Meals for Conference | \$280 x 2 = \$560 |
| Meals for TA | \$280 x 2 = \$560 |

Funds requested for conference and convention costs are for the staff currently paid directly on this federal award, and for department staff providing in kind services. In addition, there may be times when it is beneficial to the objectives of this grant program to allow other department staff to attend these conferences and conventions utilizing these federal funds.

- b) Total Mileage reimbursement: \$423
 Funds are requested for in-state travel of one (1) PREP staff to cover the cost of mileage reimbursement.
 900 miles/year @ \$.47/mi = \$423
- c) Travel State Business includes tolls and parking expenses (estimated) \$300

Telephone	\$2,521
Central Office Communication System, per employee annual assessment	\$8,900

1.4 Grants-In-Aid \$1,161,219

The grants in aid for this proposal has been computed as follows:

Auditing and grant processing services, at a .30% rate
Proposed amount of grant funding: \$1,048,144 x .0030 = \$3,304

Contractual/Grant \$1,098,134

Consultation/Professional Services \$59,781
Funds requested for consultation/professional services are for technical assistance, professional development, training, or other professional services requested by sub-awardees, the NJ Department of Health's youth advisory boards, and youth interns.

1.5 Indirect Cost \$17,008

The New Jersey Department of Health negotiates an indirect cost rate with the Department of Health and Human Services, Region II, Administrative Support Center, Division of Cost Allocation. The current rate is 14.6% of direct salaries and wages and was negotiated for the period July 1, 2024 to June 30, 2025.

$$\$116,496 \times .146 = \$17,008$$

2.0 Other Administrative Data

N/A

2.1 Acceptance of Terms and Conditions

This proposal is submitted in response to RFA No. HHS-2020-ACF-ACYF-PREP-1138 and is predicated upon all the terms and conditions of this afore-mentioned RFA.

2.2 Time Allowance

The New Jersey Department of Health agrees this response to RFA No. HHS-2020-ACF-ACYF-PREP-1138 is firm for a period of at least ninety days from November 30, 2024, for acceptance thereof by the Government.

2.3 Persons Authorized to Conduct Negotiations

Those authorized to conduct contract negotiations for RFA No. HHS-2020-ACF-ACYF-PREP-1138 are listed below:

1. Nancy Scotto-Rosato, Assistant Commissioner, Family Health Services, (609) 292-4043
2. Jennie Blakney, Child and Adolescent Health Program Manager, (609) 913-5352
3. Eric S. Carlsson, Director, Budget and Financial Planning, (609) 376-8480

2.4 Facility Requirements

The New Jersey Department of Health will provide all equipment and facilities required for performance of the grant except for those requested on 1.4.

2.5 Internal Revenue Service Employer Identification Number and Dunn & Bradstreet Number

IRS Number 21-6000-928
MPIN Number

Duns Number 806418075
NJDHSS046

2.6 Financial Capacity

The New Jersey Department of Health has the necessary financial capacity, working capital, and other resources to perform the grant without assistance from outside sources except for the funds requested in this proposal.

2.7 Payments

If the funds will be awarded from the Federal Department of Health and Human Services, we request that reimbursement of costs be made under Letter-of-Credit Authorization Number 75086203. For funds that are requested from the U.S. Department of Housing and Urban Development (HUD), U.S. Department of Agriculture, and the U.S. Department of Education, please contact Financial Services for the correct payment Authorization Number.

If monthly reimbursement of costs based upon the completion of an expenditure report is required, this Department will be agreeable to this arrangement if payments can be received within thirty (30) days of receipt of a satisfactory invoice. If payments cannot be guaranteed under this time frame, advanced payments will be required.

2.8 Payment Address if Award is By Payment Vouchers:

The mailing address for payments is:

New Jersey Department of Health
Budget & Financial Planning
55 N. Willow Street – Floor 6
Trenton, New Jersey 08625-0360

2.9 Technical Representative

The persons authorized to represent the technical proposal are listed below:

Nancy Scotto-Rosato, Assistant Commissioner, Family Health Services, (609) 292-4043

Jennie Blakney, Child and Adolescent Health Program Manager, Family Health Services,
(609) 913-5352

Budget PlanProgram Name: PREPState Fiscal Year: 27Program Period: 10/1/26-9/30/27RESOURCES

Grant Name (APU)	Allocation Amount	Carry Over Year	Carry over amount
Federal (APU)			
24-505	\$1,397,003		
State (APU)			
Other (APU)			
Total Resources:	\$1,397,003		

ACCOUNT INFORMATION

Program Abbreviation
Grant Name/Account Title
Fund Type
Project Period
Fiscal Year
APU
Cost Center

PRP	SPE								
Personal Responsibility	Professional Engagement Program								
FF	FF								
10/1/2026-9/30/2027	1/2026-9/30/2027								
2027	2027								
505									
4535									

EXPENDITURES

PERSONAL SERVICES:

1210 Salaries & Wages
1910 Employee Benefits

										TOTAL
\$116,496.00										116,496.00
\$83,236.00										83,236.00

MATERIALS & SUPPLIES:

2110 Office, Examination, & Notary
2112 Data Processing
2120 Printing
2130 Photocopy & Microfilming
2140 Photocopy & Microfilming
2150 Reference Books
2320 Education
2410 Household & Security
2610 Other Materials & Supplies

										-
										-
										-
										-
										-
										-
										-
										-
										-

SERVICES OTHER THAN PERSONAL:

3010 Travel State Business
3015 P-CARD EZ PASS
3020 Conferences & Conventions
3030 Mileage Reimbursement
3110 Telephone
3210 Postage
3410 Info System & Telecom Development
3420 Info Processing, Telecom, & Oper
3430 Software
3450 Maint of Computer Software & Equip
3610 Consult/Advisory Prof Services
3623 Transcription Services
3641 WIC Banking Services
3810 Staff Training
3820 Subscriptions
3825 Advertising
3830 Memberships
3890 Miscellaneous: **Audit Fee**
3910 Information Processing - Internal

300.00										300.00
										-
6,900.00										6,900.00
423.00										423.00
2,521.00										2,521.00
										-
8,900.00										8,900.00
										-
										-
59,781.00										59,781.00
										-
										-
										-
										-
										-
3,154.00	150.00									3,304.00
										-

MAINTENANCE & FIXED CHARGES

4110 Maint of Equip
4410 Rent-Buildings & Grounds
4510 Rent - Central Motor Pool

										-
										-
										-

SPECIAL PURPOSE:

5810 Other Special Purpose/ Indirect

17,008.00										17,008.00
-----------	--	--	--	--	--	--	--	--	--	-----------

STATE AID & GRANTS:

6140 Grants-In-Aid
6150 Grants-In-Aid to Individuals
6199 Grants-In-Aid Refunds

1,048,134.00	50,000.00									1,098,134.00
										-
										-

CAPITAL ADDITIONS, IMPROVEMENTS, & EQUIP

7410 Vehicular Equipment
7610 Other Equipment
7710 Info Processing Equipment

										-
										-
										-

TOTAL FOR COST CENTER	1,346,853.00	50,150.00	-	-	-	-	-	-	-	1,397,003.00
GRAND TOTAL										
VARIANCE:										-

Direct Labor

Personnel – (Full Name)	Position Title	Salary	% On Grant	In-Kind	Total
Jessica Shields	PMO	\$88,340	100.00%	\$0.00	\$88,340.00
Mark Opdyke	GMO	\$95,925	10.00%	\$86,332.10	\$9,592.46
Vacant Program Specialist	PMO	\$56,253	33.00%	\$37,689.51	\$18,563.49
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
			100.00%	\$0.00	\$0.00
		\$0	100.00%	\$0.00	\$0.00
Sub Total				\$124,021.61	\$116,495.95

Labor Overhead

	% Rate	Total
Fringe Benefit	63.80%	\$74,324.41
Social Security Taxes (FICA)	7.65%	\$8,911.94
Sub Total		\$83,236.35

Exhibit 2

*State of New Jersey***DEPARTMENT OF HEALTH**

DIVISION OF FAMILY HEALTH SERVICES

PO BOX 364

TRENTON, N.J. 08625-0364

www.nj.gov/healthPHILIP D. MURPHY
*Governor*TAHESHA L. WAY
*Lt. Governor*KAITLAN BASTON, MD, MSc, DFASAM
Commissioner

October 28, 2024

RE: New Jersey Title V Sexual Risk Avoidance Education (SRAE)

Dear Latanya Bispham-Robinson,

New Jersey is pleased to apply for continuation of State SRAE funding Sexual Risk Avoidance Education funding (FY25), to replicate evidence-based program models that have been proven effective in delaying sexual activity and changing behaviors of sexually active youth to reduce pregnancy. There are no changes to the state plan at this time.

This letter of intent is requesting \$1,303,470 for the project. Forms SF-424M, SF424A, an itemized budget, and budget narrative have been enclosed as requested.

Letters concerning this grant may be addressed to:

Tiffany L. Charles, Program Specialist
Child & Adolescent Health Program
Division of Family Health Services
NJ Department of Health
PO Box 364
Trenton, NJ 08625-0364

Sincerely,

Nancy Scotto-Rosato, PhD
Assistant Commissioner
Division of Family Health Services

Enclosure

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

1.a. Type of Submission:

- ☒ Application
☐ Plan
☐ Funding Request
☐ Other

Other (specify):

1.b. Frequency:

- ☒ Annual
☐ Quarterly
☐ Other

Other (specify):

1.d. Version:

- ☒ Initial ☐ Resubmission ☐ Revision ☐ Update

2. Date Received:

10/22/2024

STATE USE ONLY:

3. Applicant Identifier:

5. Date Received by State:

4a. Federal Entity Identifier:

6. State Application Identifier:

4b. Federal Award Identifier:

2501NJSRAE

1.c. Consolidated Application/Plan/Funding Request?

Yes ☐ No ☒

7. APPLICANT INFORMATION:

a. Legal Name:

New Jersey Department of Health

b. Employer/Taxpayer Identification Number (EIN/TIN):

21-6000-928

c. UEI:

MQKPEU6D1BT5

d. Address:

Street1:

55 North Willow Street, Fl. 4, PO Box 364

Street2:

City:

Trenton

County / Parish:

Mercer

State:

NJ: New Jersey

Province:

Country:

USA: UNITED STATES

Zip / Postal Code:

08625-0364

e. Organizational Unit:

Department Name:

NJ Department of Health

Division Name:

Family Health Services

f. Name and contact information of person to be contacted on matters involving this submission:

Prefix:

First Name:

Tiffany

Middle Name:

Last Name:

Charles

Suffix:

Title: Program Specialist

Organizational Affiliation:

NJ Department of Health

Telephone Number: 609-913-5354

Fax Number:

Email: Tiffany.Charles@doh.nj.gov

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY**8a. TYPE OF APPLICANT:**

A: State Government

Other (specify):

b. Additional Description:

9. Name of Federal Agency:

Health and Human Services

10. Catalog of Federal Domestic Assistance Number:

93.235

CFDA Title:

Sexual Risk Avoidance Education (SRAE)

11. Descriptive Title of Applicant's Project:

New Jersey SRAE is to fund state agencies to implement education exclusively on sexual risk avoidance that teaches participants to voluntarily refrain from sexual activity.

12. Areas Affected by Funding:**13. CONGRESSIONAL DISTRICTS OF:**

a. Applicant:

State

b. Program/Project:

State

Attach an additional list of Program/Project Congressional Districts if needed.

Add Attachment

Delete Attachment

View Attachment

14. FUNDING PERIOD:

a. Start Date:

10/01/2025

b. End Date:

09/30/2026

15. ESTIMATED FUNDING:

a. Federal (\$):

1,303,470.00

b. Match (\$):

16. IS SUBMISSION SUBJECT TO REVIEW BY STATE UNDER EXECUTIVE ORDER 12372 PROCESS?☐ a. This submission was made available to the State under the Executive Order 12372 Process for review on: ☐ b. Program is subject to E.O. 12372 but has not been selected by State for review.☒ c. Program is not covered by E.O. 12372.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY**17. Is The Applicant Delinquent On Any Federal Debt?**Yes ☐ No ☒

18. By signing this application, I certify (1) to the statements contained in the list of certifications and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)**

** I Agree ☒

** This list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.

Authorized Representative:

Prefix:

First Name:

Middle Name:

Last Name:

Suffix:

Title:

Organizational Affiliation:

Telephone Number:

Fax Number:

Email:

Signature of Authorized Representative:

Date Signed:

Attach supporting documents as specified in agency instructions.

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Consolidated Application/Plan/Funding Request Explanation:

APPLICATION FOR FEDERAL ASSISTANCE SF-424 - MANDATORY

Applicant Federal Debt Delinquency Explanation:

BUDGET INFORMATION - Non-Construction ProgramsOMB Number: 4040-0006
Expiration Date: 02/28/2025**SECTION A - BUDGET SUMMARY**

Grant Program Function or Activity (a)	Catalog of Federal Domestic Assistance Number (b)	Estimated Unobligated Funds		New or Revised Budget		
		Federal (c)	Non-Federal (d)	Federal (e)	Non-Federal (f)	Total (g)
1. SRAE	93.235	\$	\$	\$ 1,303,470.00	\$	\$ 1,303,470.00
2.						
3.						
4.						
5. Totals		\$	\$	\$ 1,303,470.00	\$	\$ 1,303,470.00

SECTION B - BUDGET CATEGORIES

6. Object Class Categories	GRANT PROGRAM, FUNCTION OR ACTIVITY				Total (5)
	(1)	(2)	(3)	(4)	
	SRAE				
a. Personnel	\$ 91,722.82	\$	\$	\$	\$ 91,722.82
b. Fringe Benefits	65,260.78				65,260.78
c. Travel	5,008.00				5,008.00
d. Equipment	11,301.00				11,301.00
e. Supplies					
f. Contractual					
g. Construction					
h. Other	1,116,785.86				1,116,785.86
i. Total Direct Charges (sum of 6a-6h)	1,290,078.46				\$ 1,290,078.46
j. Indirect Charges	13,391.54				\$ 13,391.54
k. TOTALS (sum of 6i and 6j)	\$ 1,303,470.00	\$	\$	\$	\$ 1,303,470.00
7. Program Income	\$	\$	\$	\$	\$

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SECTION C - NON-FEDERAL RESOURCES

(a) Grant Program		(b) Applicant	(c) State	(d) Other Sources	(e)TOTALS
8.	SRAE	\$	\$	\$	\$
9.					
10.					
11.					
12. TOTAL (sum of lines 8-11)		\$	\$	\$	\$

SECTION D - FORECASTED CASH NEEDS

	Total for 1st Year	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
13. Federal	\$ 1,303,470.00	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50
14. Non-Federal	\$				
15. TOTAL (sum of lines 13 and 14)	\$ 1,303,470.00	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50

SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

(a) Grant Program		FUTURE FUNDING PERIODS (YEARS)			
		(b)First	(c) Second	(d) Third	(e) Fourth
16.	SRAE	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50
17.					
18.					
19.					
20. TOTAL (sum of lines 16 - 19)		\$ 325,867.50	\$ 325,867.50	\$ 325,867.50	\$ 325,867.50

SECTION F - OTHER BUDGET INFORMATION

21. Direct Charges:	1,290,078.46	22. Indirect Charges:	13,391.54
23. Remarks:			

New Jersey Department of Health
BUSINESS PROPOSAL FOR GRANTS AND COOPERATIVE AGREEMENTS
 UPDATED October 28, 2024

1.0 General

The New Jersey Department of Health maintains its accounting records in conformance with State and Federal policies and in compliance with OMB Federal Circular A-102. Our accounting system treats all costs consistently, and in most cases, direct costs are distributed to the program/activity cost center level as the transaction is incurred.

The Department of Health has a fiscal year that ends on June 30. This proposed budget, however, reflects costs for the period identified in the Request for Application (RFA) and the Department's accounting records will be maintained in such manner as to identify costs to the grant year. The accounting system will maintain accountability for this grant separately from all other fund sources.

The cost estimate provided in this proposal represents the best judgement of the anticipated costs to be incurred during the grant period and includes normal and inflationary cost increases as described.

1.1 Direct Labor (Personnel) **\$91,723**

The salary structure for employees of the State of New Jersey is based upon the New Jersey Compensation Plan, prepared by the New Jersey Civil Service Commission and adjusted annually based upon the negotiation of labor agreements.

<u>Position Title and Name</u>	<u>Annual Salary</u>	<u>%Time</u>	<u>Months</u>	<u>Amount</u>
Program Manager- Tiffany Charles	\$57,301	100%	12	\$57,301
SPEP Prog. Specialist-Vacant	\$50, 226	50%	12	\$25, 113
Grants Manager- Mark Opdyke	\$93,087	10%	12	<u>\$9,308</u>
				\$91,723

Annual increments equal to 5% of base salary are awarded to State employees based on satisfactory job performance determined by the employee's supervisor. This is awarded in nine annual increments on the anniversary of employment in a job title.

There will be no need to budget funds for the Deputy Commissioner's Office.

1.2 Labor Overhead **\$65,261**

Labor overhead is defined in this budget as non-salary costs incurred by an employer on behalf of an employee. These costs are treated consistently as a direct cost to each grant. The labor overhead is broken down into two categories: Fringe benefits and Social Security Taxes (F.I.C.A.). The current rate is 71.15%.

- a. Fringe Benefits - the employer's share of pensions, health benefits, unemployment insurance, earned and unused lump-sum sick leave payments and prescription drugs and eyeglass programs. The rate is 63.50% of salary and wages and is negotiated annually by the New Jersey Department of Treasury with the U.S. Department of Health and Human Services. The current rate is approved for the period June 1, 2024 to June 30, 2025. This document will be updated when the new rate is provided by OMB. The current fringe rate is 63.50%.

$$\$91,723 \times .635 = \$65,261.$$

- b. Social Security Taxes (F.I.C.A.) - this rate is subject to Federal legislation. The cost is calculated based on a fixed percentage of salary and wages applied up to a fixed maximum annual salary of an employee. This cost has been calculated based on a calendar year (January 1-December 31) for each position identified as Direct Labor. The current Social Security Taxes (F.I.C.A.) is 7.65%.

$$\$91,723 \times .0765 = \$13,392.$$

1.3 **Travel** **\$5,008**

The Department of Health is subject to the State of New Jersey travel regulations. The use of personal vehicles is allowed when State motor pool vehicles are not available. Reimbursement is provided at the rate of \$.47 per mile. The State re-evaluates this rate annually.

- a) Out-of-state travel: \$4,400
 Funds are requested for two (2) SRAE staff to attend a professional conference and one staff to attend two (2) TA's during the grant year.
- | | |
|--|-------|
| Airfare and ground transportation - Conference | \$900 |
| Airfare and ground transportation - TA 1 | \$600 |
| Airfare and ground transportation - TA 2 | \$600 |
| Hotel - Conference | \$900 |
| Hotel - TA 1 | \$400 |
| Hotel - TA 2 | \$400 |
| Meals - Conference | \$200 |
| Meals - TA 1 | \$200 |
| Meals - TA 2 | \$200 |
- b) In-state travel: \$608
 Funds are requested for in-state travel of one (1) SRAE staff to cover the cost of mileage reimbursement.
- | | |
|--|-------|
| 400 miles/year @\$.47/mi | \$188 |
| Tolls and parking expenses (estimated) | \$420 |

Funds requested for conference and convention costs are for the staff currently paid directly on this federal award, and for department staff providing in kind services. In addition, there may be times when it is beneficial to the objectives of this grant program to allow other department staff to attend these conferences and conventions utilizing these federal funds.

1.4 Other Direct Costs \$1,128,087

Other direct cost reflected in this proposal has been computed as follows:

Telephone	\$2,001
Central Office Communication System, per employee annual assessment	\$9,300
Auditing and grant processing services, at a .30% rate Proposed amount of grant funding: \$1,116,786 x .0030 =	\$3,350
Contractual/Grant	\$1,113,436

1.5 Indirect Cost \$13,392

The New Jersey Department of Health negotiates an indirect cost rate with the Department of Health and Human Services, Region II, Administrative Support Center, Division of Cost Allocation. The current rate is 14.6% of direct salaries and wages and was negotiated for the period July 1, 2023 to June 30, 2024.

$$\$91,723 \times .146 = \$13,392$$

2.0 Other Administrative Data

N/A

2.1 Acceptance of Terms and Conditions

This proposal is submitted in response to RFA No. HHS-2018-ACF-ACFY-SRAE-1359 and is predicated upon all the terms and conditions of this afore-mentioned RFA.

2.2 Time Allowance

The New Jersey Department of Health agrees this response to RFA No. HHS-2018-ACF-ACFY-SRAE-1359 is firm for a period of at least ninety days from July 9, 2026 for acceptance thereof by the Government.

2.3 Persons Authorized to Conduct Negotiations

Those authorized to conduct contract negotiations for RFA No. HHS-2018-ACF-ACFY-SRAE-1359 are listed below:

1. Nancy Scotto-Rosato, Assistant Commissioner, Family Health Services, (609) 292-9560
2. Jennie Blakney, Child and Adolescent Health Program Manager, (609) 913-5352
3. Eric S. Carlsson, Director, Budget and Financial Planning, (609) 376-0923

2.4 Facility Requirements

The New Jersey Department of Health will provide all equipment and facilities required for performance of the grant except for those requested on 1.4.

2.5. Internal Revenue Service Employer Identification Number and Dunn & Bradstreet Number

IRS Number 21-6000-928
MPIN Number

Duns Number 806418075
NJDHSS046

2.6 Financial Capacity

The New Jersey Department of Health has the necessary financial capacity, working capital, and other resources to perform the grant without assistance from outside sources except for the funds requested in this proposal.

2.7 Payments

If the funds will be awarded from the Federal Department of Health and Human Services, we request that reimbursement of costs be made under Letter-of-Credit Authorization Number 75086203. For funds that are requested from the U.S. Department of Housing and Urban Development (HUD), U.S. Department of Agriculture, and the U.S. Department of Education, please contact Financial Services for the correct payment Authorization Number.

If monthly reimbursement of costs based upon the completion of an expenditure report is required, this Department will be agreeable to this arrangement if payments can be received within thirty (30) days of receipt of a satisfactory invoice. If payments cannot be guaranteed under this time frame, advanced payments will be required.

2.8 Payment Address if Award is By Payment Vouchers:

The mailing address for payments is:

New Jersey Department of Health
Budget & Financial Planning
55 N. Willow St, 6th floor
PO Box 360
Trenton, New Jersey 08625-0360

2.9 Technical Representative

The persons authorized to represent the technical proposal are listed below:

Nancy Scotto-Rosato, Assistant Commissioner, Family Health Services, (609) 292-9560

Jennie Blakney, Child and Adolescent Health Program Manager, (609) 913-5352

Exhibit 3



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Nancy Scotto-Rosato
New Jersey Dept. of Health and Senior Services
50 East State Street, 6th Floor
P.O. Box 364
Trenton, NJ, 08625

RE: State Personal Responsibility Education Program 1601NJPREP

Dear Nancy Scotto-Rosato:

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual

- Handouts
- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit 4



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501NJPREP
FAIN# 2501NJPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

Health, New Jersey Department of
50 East State Street
P. O. Box 364

TRENTON, NEW JERSEY 08625

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1216000928B7

5. Data Universal Numbering System (DUNS)

806418075

6. Recipient's Unique Entity Identifier

MQKPEU6D1BT5

7. Project Director or Principal Investigator

Jessica Shields

Jessica.Shields@doh.nj.gov

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information

11. Award Number

2501NJPREP

12. Unique Federal Award Identification Number (FAIN)

2501NJPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award

including Approved Cost Sharing or Matching

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer - Signature

David Lee

Grants Management Officer

Financial Information

End Date 09-30-2027

\$878,361.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$1,397,003.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501NJPREP

FAIN# 2501NJPREP

Federal Award Date: August 6, 2025

Recipient Information

Health, New Jersey Department of
50 East State Street
P. O. Box 364
TRENTON, NEW JERSEY 08625

Employer Identification Number (EIN): 1216000928B7

Data Universal Numbering System (DUNS): 806418075

Recipient's Unique Entity Identifier: MQKPEU6D1BT5

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2025,G99SU25	\$1,397,003.00	\$878,361.00	\$1,397,003.00	2501NJPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of -effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters .

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit 5



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501NJSRAE
FAIN# 2501NJSRAE
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

Health, New Jersey Department of
50 East State Street
6th Floor

TRENTON, NEW JERSEY 08625

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1216000928B7

5. Data Universal Numbering System (DUNS)

806418075

6. Recipient's Unique Entity Identifier

MQKPEU6D1BT5

7. Project Director or Principal Investigator

Jennie Blakney

jennie.blakney@doh.nj.gov

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Jerry Milner

Program Authorizing Official

ACYF - Family and Youth Services Bureau

Milner.Jerry@acf.hhs.gov

111-111-1111

Federal Award Information

11. Award Number

2501NJSRAE

12. Unique Federal Award Identification Number (FAIN)

2501NJSRAE

13. Statutory Authority

The Bipartisan Budget Act of 2018, Title V, Section 2954, Public Law 113-93, 42 US Code 710

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.235

16. Assistance Listing Program Title

Sexual Risk Avoidance Education (SRAE)

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2026

\$884,173.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$1,303,470.00

*See Remarks

*See Remarks

End Date 09-30-2026

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Footnotes

Grants Management Officer



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501NJSRAE

FAIN# 2501NJSRAE

Federal Award Date: August 6, 2025

Recipient Information

Health, New Jersey Department of
50 East State Street
6th Floor
TRENTON, NEW JERSEY 08625

Employer Identification Number (EIN): 1216000928B7

Data Universal Numbering System (DUNS): 806418075

Recipient's Unique Entity Identifier: MQKPEU6D1BT5

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-25-1512	2025,G990597	\$1,303,470.00	\$884,173.00	\$1,303,470.00	2501NJSRAE	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Sexual Risk Avoidance Education Program. Funds are subject to the requirements of Section 510 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the SRAE program under which this grant has been awarded, at 42 U.S.C. § 710, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit 6



Tuesday, August 26, 2025

Ms. Nancy Scotto-Rosato
New Jersey Department of Health and Senior Services
50 East State Street, 6th Floor
PO Box 364
Trenton, NJ 08625

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (2301NJPREP), 2024 (2401NJPREP), 2025 (2501NJPREP).

Dear Ms. Scotto-Rosato:

On April 14, 2025, the Administration for Children and Families (ACF) requested that New Jersey provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing New Jersey's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from New Jersey's PREP curricula and program materials:¹

High School FLASH, Third Edition, Educator Manual

- Implementation Toolkit, Page 13: "Sexual orientation and gender identity concepts"

¹ ACF initiated a medical accuracy review to determine if New Jersey's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, New Jersey will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

- Everyone has a sexual orientation and a gender identity.
 - A person knows their sexual orientation because of who they feel attracted to.
 - A person knows their gender identity because they feel like a boy, a girl, both, neither or somewhere in between.
 - People of all sexual orientations and gender identities need to know how to prevent pregnancy and STOs, either for themselves or to help a friend.”
- Implementation Toolkit, Page 14-15: “Teaching about sexual orientation and gender identity creates better understanding and respect among all students and creates a climate where discrimination is unwelcome. It also provides a necessary protection for lesbian, gay, bisexual, trans, and queer (LGBTQ) students. The FLASH curriculum has been shown through rigorous evaluation to significantly reduce homophobia and transphobia among high school students (Kesler et al., 2023). It is important for educators to routinely teach inclusively, as every classroom will likely have students who identify (or will later identify) as LGBTQ, as well as students with family and friends who identify as LGBTQ.”

FLASH

- Lesson 4, Page 4: “1. Let’s start with **assigned sex**.
 - When a baby is born, the doctor usually says the baby is male or female, depending on the appearance of the baby’s genitals. This is the baby’s assigned sex.
 - The assigned sex of babies with a vagina, clitoris, and XX chromosomes is usually female.
 - The assigned sex of babies with a penis, scrotum, and XY chromosomes is usually male.
 - Some babies are born with variations in their genitals, reproductive organs, or chromosomes. This is called intersex. The doctor will usually assign a sex of male or female, although people may identify differently as they get older.

If someone asked you to summarize assigned sex, what would you say? Who is it assigned by? Right, it’s when the doctor says, ‘It’s a boy’ or ‘It’s a girl,’ depending on the baby’s genitals. Good job. Any questions.

2. Let’s move on to gender identity. While assigned sex is based on the body parts the doctor sees at birth, gender identity has nothing to do with body parts.

- Gender identity is a deep feeling people have about whether they are a guy, a girl, both, neither, or somewhere in between.
- People often know their gender identity when they are very little, before they start kindergarten, although everyone is different and some people will know when they are younger or older.

- Cisgender is when a person's gender identity is the same as their assigned sex. For example, a doctor says, 'It's a girl!' at a baby's birth, and that child later feels 'Yes, I am a girl.'
- Transgender is when a person's gender identity is not the same as their assigned sex. For example, a doctor says, 'It's a girl!' at a baby's birth, and that child later feels 'No, I'm not a girl.' People may also identify as nonbinary, genderqueer, or some other gender identity.

So how is gender identity different than assigned sex? Correct, gender identity is based on a deep feeling that a person has about themselves."

Teen Outreach Program (TOP), 2nd Edition, Curriculum

- LAM-SU-A2, "Defining Sexuality," page 80: **"Facilitator Tip:** Sexuality is complex and can be difficult to define. It is normal for participants to struggle to understand it broadly and to have differing views. Support participants in sharing and listening to one another, and make sure dialogue remains respectful and inclusive.

Circle 'Sex' in 'Sexuality.'

Ask

- How much of our Word Web is about 'having sex' or 'sex' as physical behavior?

Share

- Sexuality is more than physical behavior.

Ask

- Besides physical behavior, what else do you think could be part of a person's sexuality?

If participants do not identify in the following, add

- Sexual and reproductive anatomy
- Body image
- Biological sex
- Gender including gender identity, gender expression and gender roles
- Sexual orientation
- Desires, pleasure, intimacy and reproduction
- Beliefs, attitudes and values about sexuality"

- LAM-SI-F1, "This Is Me. Who Are You? page 94: "Our identity, or how we see ourselves, includes many different things, such as our race/ethnicity, nationality, culture, religious affiliation, age, gender, sexuality, roles (Ex: athlete, big sister, etc.), personality traits and interests."

- LAM-HW-F1, Facilitator Resource, “Frequently Asked Questions,” page 148: **“Why would someone with a penis not identify as a boy/man? Why would someone with a vulva not identify as a girl/woman?”**
When we use body parts to describe people, we’re talking about ‘biological sex,’ or sex assigned at birth, which is different than gender. Gender is how people identify and express themselves. Transgender people are people whose gender identity is different from their biological sex or sex assigned at birth. Gender non-conforming and non-binary people are people whose gender identities are not exclusively either boy/man or girl/woman. However someone identifies, they should feel safe, respected and included in TOP.”

The “purpose” of a PREP grant award is for states to “carry out personal responsibility education programs consistent with this subsection.” 42 U.S.C. § 713(b)(1). The statute defines PREP as “a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C).” 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency’s authority to administer the program consistent with the authorizing legislation as enacted by Congress. New Jersey’s current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: “(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.”

Therefore, ACF instructs New Jersey to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ New Jersey is directed to remove these and all similar language throughout their curricula and program materials. Should New Jersey fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Ricky Richard, ricky.richard@acf.hhs.gov.

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF CHRIS SPICER

**DECLARATION OF CHRIS SPICER, PLANNED PARENTHOOD OF CENTRAL AND
WESTERN NEW YORK REPRESENTATIVE**

I, Chris Spicer, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of New York. I am over the age of 18, competent to testify to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Vice President of Programs at Planned Parenthood of Central and Western New York (PPCWNKY). I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief in the above case, which I understand challenges new conditions the federal government has placed on funding provided under the Personal Responsibility Education Program (PREP) and Sexual Risk Avoidance Education (SRAE) federal grant programs relating to what it calls "gender ideology."

3. I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from PPCWNKY records by others within the organization.

4. I have worked in various capacities at PPCWNKY for the last 26 years focusing on advancing community-based health care. In my current role as Vice President of Programs, I specialize in developing and sustaining impactful partnerships, leading our regional community education, and managing our portfolio of grants, including the PREP grant we receive from the New York State Department of Health (NYSDOH).

5. I received my bachelor's degree in psychology, health and human services, and philosophy of professional ethics from the University of Buffalo in 1998 and my master's in organizational leadership from Medaille University in 2010.

6. Prior to becoming Vice President of PPCWNY, I served as the organization's Director of Special Projects and Strategic Collaborations, where I oversaw management of PPCWNY's over \$10 million in government grants and led our population health initiatives.

7. During my first 16 years at PPCWNY, I worked directly on our sex education initiatives first as a Community Trainer, then a Training and Curriculum Specialist, and finally as a Comprehensive Adolescent Pregnancy Prevention Coordinator. As a Comprehensive Adolescent Pregnancy Prevention Coordinator, I launched, managed, and implemented PPCWNY's Comprehensive Adolescent Pregnancy Prevention Program (CAPP) programming from 2011 to 2014. In all of these roles, I have worked directly with youth and community partners, either by instructing students or developing curricula on evidence-based sexuality education programs that have advanced healthy decision-making.

8. PPCWNY protects and provides health care and education that empowers individuals and families with respect and without judgment. We operate 9 health centers and 7 community programs sites for a total of 16 locations. Those locations are in Erie, Niagara, Wyoming, Livingston, Orleans, Monroe, Ontario, and Onondaga County. We are proud to offer robust health services, including birth control, STI testing and treatment, cancer screenings, and wellness exams, as well as extensive sexual health education resources through our education department, which offers medically accurate programs on sexuality, sexual health, and relationships customized for all ages and abilities. We also provide sexual violence and domestic violence response services including a 24-hour hour hotline and rape crisis response at hospitals and other locations. We implement this work in over 150 settings annually, including in schools and community settings, such as after-school programs, community centers, and residential facilities.

9. NYSDOH is a PREP grantee. NYSDOH contracts with PPCWNY to administer PREP programming to specific high needs ZIP codes within Buffalo, New York and has done so since 2023.

10. As part of its PREP programming, PPCWNY administers comprehensive, evidence-based educational programming to reduce pregnancy, HIV, sexually transmitted infections (STIs), and birth rates for youth directly in local schools and community centers and through innovative partnerships. PPCWNY offers evidence-based, medically accurate and age-appropriate sexuality education at six local schools and three other community centers in Buffalo, serving nearly 600 students a year. PPCWNY also uses PREP funding to support a youth mental health collaborative effort between PPCWNY's Teen Reality Theatre, Mental Health Advocates of Western New York's (MHAWNY) Peer Advocates, and Buffalo String Works students. This unique collaborative raises up youth voices in support of their peers with messages of hope, resilience and offers of support through a purpose built 24-hour hotline and online resource. This work is partially funded by PREP.

11. PPCWNY's sexuality education programming is evidence-based, medically accurate, and age appropriate. PPCWNY utilizes "Be Proud! Be Responsible!" curriculum, which both New York and the federal government have approved for PREP instruction. This curriculum addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" required under PREP's authorizing legislation. To comply with federal requirements that our instruction be provided in the cultural context most appropriate for individuals in the population group to which the programming is directed, our instruction is discussion-based and features role-playing facilitations that are driven by the questions, identities, and concerns of our students. PPCWNY also works with local youth centers to adapt our

curriculum to our youth populations by seeking feedback from students and submitting their adaptations to the ACT For Youth Center for Community Action (ACT), which is housed at the Bronfenbrenner Center for Translational Research at Cornell University. ACT is responsible for approving these adaptations and ensuring they are evidence-based, medically accurate, and age appropriate in adherence with PREP grant requirements. As providers of sexuality education in Buffalo Public Schools, we also ensure that our PREP curricula adhere to the requirements of the school district's graduation requirements and regularly seek approval from the local school board.

12. PPCWNY's Teen Reality Theatre is a creative group that gives Buffalo teens the resources and guidance to develop podcasts, social media content and theatrical productions about healthy relationships, sexual health and youth mental health struggles and resources. Teen Reality Theatre expands the reach of PPCWNY's PREP sexuality education and adult preparation initiatives by supporting the nearly 16 youth participants in the group to produce accessible social media content and in-person performances for their peers on PREP designated topics.

13. Finally, PPCWNY partners with Mental Health Advocates of Western New York (MHAWNY) to support youth mental wellness and life skills development. Through this collaboration, Youth Peer Educators from MHAWNY work alongside Teen Reality Theatre performers and Youth Musicians from Buffalo String Works to create and share messages of connection, hope, and resilience with their peers. These youth-led efforts promote positive mental health and achievement, and connect participants to critical support resources, including MHAWNY's 24-hour hotline. This trauma-informed, culturally responsive approach strengthens community engagement and reinforces the program's commitment to holistic youth development.

14. Across the State, 600 Buffalo youth annually participate in our programming implemented with PREP funding. However, through the social media content of our Teen Reality

Theatre, we are able to reach and educate thousands of youth within the specific high need Buffalo ZIP codes we have been entrusted to serve and beyond. In 2024, PPCWNY received \$250,000 in PREP funding to provide these services in New York.

Effectiveness of Programs

15. As part of its work administering state education programming, PPCWNY measures outcomes by utilizing the evaluation services of ACT. In partnership with ACT, PPCWNY surveys “Be Proud! Be Responsible!” participants before and after each course it administers. Our preliminary reports show that in the period between summer 2023 and summer 2025, participants reported an increased ability to say no to sex, use a condom, use birth control or a condom, find and get STD/HIV testing, get a partner to not have sex or use a condom, and find the health information and services they need in their communities after completing “Be Proud! Be Responsible!” This data contributes to ACT’s statewide, statistically significant findings that students who participate in “Be Proud! Be Responsible!” and other sexuality education curriculum via PREP and CAPP report an increased ability to access health information, use condoms or birth control, and say “no” to sex, indicating the program’s positive impact on participants’ knowledge and confidence in managing sexual health and related decisions.

Communications from Federal Government

16. PPCWNY is aware that NYSDOH received a notice of Award (NOA) describing the financial information associated with New York’s PREP grant award funds, dated August 6, 2025, stating that recipients are prohibited “from including gender ideology in any program or service that is funded with this award.”

17. PPCWNY is also aware that on August 7, 2025, ACF published Supplemental T&Cs applicable to awards and award modifications that add funding. The Supplemental T&Cs

prohibit grant recipients from including so-called “gender ideology” in PREP-funded programs and services.

18. PPCWNY is also aware that on August 26, 2025, NYSDOH received another letter from ACF (the PREP Directive) stating that New York’s “current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified” because New York’s curriculum and materials include “gender ideology.” The identified content, ACF claims, is “outside of the scope of PREP’s authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials.” ACF further instructs New York **“to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.”** ACF asserts that it may take “additional enforcement action,” and listed as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.”

19. PPCWNY is aware that ACF identified portions of the “Be Proud! Be Responsible” curriculum’s Facilitator Manual as non-compliant with the Supplemental T&Cs in the PREP Directive. Those portions of the curriculum identified as non-compliant, which include merely recognizing the existence of gender-identity and lesbian, gay, bisexual, or transgender youth and same-sex relationships, are essential to creating a welcoming and non-discriminatory environment for the populations of youth we serve.

20. Moreover, it is unclear what other types of instruction or programming might be deemed noncompliant with what the Supplemental T&Cs in the PREP Directive term “gender ideology.” But if that includes merely acknowledging anything relating to gender identity or sexual orientation, it is difficult to see how the programming could continue, as providing a non-judgmental and affirming environment for youth—including for youth who may be dealing with

mental health issues, including gender dysphoria, or developing a sense of their own gender identity and sexual orientation—is both necessary to the programming’s effectiveness and central to our values and our organizational mission.

Harms to Planned Parenthood of Central and Western New York

21. PPCWNY is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive (“the Gender Conditions”). The Gender Conditions have created immense confusion and negatively impacted our organization’s ability to budget, staff our programs, or plan for the future.

22. The federal government’s threat to New York to restrict federal financial assistance if content concerning “gender ideology” is not removed puts at risk \$250,000 in annual funding. This would have a catastrophic effect on PPCWNY’s ability to offer sexuality education to Buffalo youth.

23. For example, our PREP grant partially covers the salaries of both our Teen Reality Theatre creators as well as our sexuality education facilitators. With the uncertainty of the PREP grant’s continuation past October 27, 2025, our organization is being forced to contemplate terminating the salaries of half our Teen Reality Theatre creators and sexuality education facilitators. With fewer creators and facilitators, the scope of our programs would be greatly reduced.

24. Moreover, without PREP funding, PPCWNY could no longer support Teen Reality Theatre’s collaboration with MHAWNY and Buffalo String Works to create and share messages to promote MHAWNY’S mental health hotline as this work is fully funded by this stream of funding.

25. This is just one of many examples of how any elimination of PREP funding would inhibit PPCWNY's ability to fulfill its agreements and contractual obligations. If funding is discontinued, PPCWNY must also contemplate eliminating contracts with subcontractors and vendors and breaching its Memorandum of Understanding with Buffalo Public Schools to provide comprehensive sexuality education to its students. Because of the number of businesses and community partners we work with to administer PREP, any elimination of funds would also harm Buffalo's local economy, which has relied on this project's consistent funding for the last three years.

26. Adapting our programming to comply with the Gender Conditions is logistically challenging and impractical given the structure of our youth-driven programming and the seemingly endless ways in which instructors and participants could run afoul of these directives. The broad mandate of the Gender Conditions appears to prohibit us from discussing gender identity and the particular needs of LGBTQ+ individuals. Implementing this type of censorship would be onerous and fraught with ethical dilemmas. Our instruction on sexual health is discussion-based and driven by student questions and concerns. In our experiences working with youth, we know that questions about sexual orientation and gender identity frequently emerge during these broader conversations about healthy relationships, mental health, and sexual education. Our facilitators cannot control whether a student asks a question or initiates a discussion related to gender identity. In these instances, instructors would be faced with the difficult decision of either shutting down these conversations and failing to adapt instruction to our students' needs, thus alienating and potentially harming the student, or acknowledging and affirming the student and allowing the discussion to continue, potentially running afoul of the Gender Conditions and risking loss of PREP funding. Moreover, creating an environment that fails to affirm youth, or

denies their existence, would cause psychological harm to vulnerable youth. That runs counter to our core values and mission and would undermine the efficacy of our programming by eroding trust between instructors and the populations we serve as well as undermining our credibility in the community.

Harms to Buffalo Youth

27. Undoubtedly, any elimination of PREP funding would greatly reduce our ability to educate Buffalo youth. If PPCWNY loses PREP funding, it would be unable to meet its obligations to provide age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other sexually transmitted infections (STIs). With fewer youth creators and sexuality education facilitators, we will reach fewer students on their social media feeds and fewer classrooms in Buffalo Public Schools to provide vital education about healthy relationships, mental health resources, and preventative measures to avoid pregnancy or contracting HIV and other STIs.

28. Buffalo youth will suffer. Youth in our community face immense mental health struggles and seek a safe, judgment-free space to transition to adulthood. Our PREP programming fills this gap by providing mental health resources, trusted adult mentors, and evidence-based sexuality education to help them navigate decisions about their sexual health. Without this instruction, our Buffalo community would likely see an increase in untreated mental health conditions resulting from fewer referrals to vital mental health support services, including to the Mental Health Association of Western New York mental health hotline, and an increase in teenage pregnancy rates and rates of STIs.

29. High risk youth are particularly vulnerable. From our years working with youth in these communities, we know LGBTQ+ youth face higher rates of suicide, suicidal thoughts, and

incidents of discrimination. PPCWNY's PREP program faces these disparities head-on by offering all young people, including LGBTQ+ youth, access to evidence-based, medically accurate resources related to their mental and sexual health and providing a safe discussion-based space for them to ask questions specific to their various identities. If forced to eliminate any references to LGBTQ+ individuals, identities, and relationships in our PREP curriculum, our organization will be unable to address some of these questions altogether. For example, our instructors will be unable to questions related to the dynamics between different types of cis- and transgender relationships or provide medically accurate information about how individuals of all gender identities can prevent pregnancy or contracting HIV and other STIs. If forced to ignore the realities of the health and relationship needs of LGBTQ+ youth, we would be unable to serve this high-risk population effectively. Denying or refusing to acknowledge the existence of LGBTQ+ youth would also exacerbate inequities and create a stigmatizing environment that encourages other students to disrespect LGBTQ+ students.

30. Whether PPCWNY loses funding for being out of compliance with the Gender Conditions or attempts to modify its programs to come into compliance, it will harm the very population we are being funded to serve.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 25, 2025, at Buffalo, New York.

s/ Chris Spicer

CHRIS SPICER
Vice President of Programs at Planned Parenthood of
Central and Western New York

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

**DECLARATION OF REBECCA
VINCHESKI**

**DECLARATION OF REBECCA VINCHESKI, REPRESENTATIVE OF NIAGARA
FALLS BOYS AND GIRLS CLUB**

I, Rebecca Vincheski, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of New York. I am over the age of 18, competent to testify to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Chief Executive Officer (“CEO”) of the Niagara Falls Boys and Girls Club (“NFBGC”), which I have been for the past ten years. I submit this declaration in connection with the above-captioned matter and in support of the Plaintiffs’ request for a preliminary injunction. I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from NFBGC records within the organization.

3. I received an undergraduate degree in Criminal Justice from Tiffin University in 2001 and I received a master’s in business administration from the University of Buffalo in 2009. Before this, I was a prevention specialist at a Boys and Girls Club working with children in juvenile detention and helping children make healthy life decisions related to social-emotional learning. I was promoted and became a Director of Program Operations at the Buffalo Boys and Girls Club and eventually, the Chief Operating Officer (“COO”). After working in that position for a number of years, I was promoted to become CEO of the Niagara Falls organization. I have worked at the Boys and Girls Club for over 25 years, working with thousands of young people, helping youth become adults.

4. NFBGC has a close relationship with the New York State Department of Health (“NYSDOH”), as the administer of the Sexual Risk Avoidance Education (“SRAE”) grant. We receive this grant, and I oversee the grant and the program.

5. NFBGC has been a staple in Western New York for nearly 85 years, helping children become adults. Our mission is to provide a safe, supportive place where children and youth can experience new opportunities, overcome barriers, build positive relationships and develop confidence and skills for life. NFBGC helps four- to eighteen-year-olds make healthy life decisions and achieve their dreams to grow up healthy, successful, and active participants in society. We value inclusion and opportunity and strive to offer children from all economic, cultural, and social backgrounds access to the resources, supports, and opportunities in a non-discriminatory manner that will enable them to overcome barriers and achieve their positive potential in life. We value respect and belonging, empowerment, collaboration, and speaking out. In our work, we provide a variety of programming for at-risk youth. We have recreational programs, summer programs, mentoring, tutoring, food programs, before- and after- school programs, teen and young adult programming, summer programs, sports, and art. For teens, we offer leadership and mentorship, career and college readiness, wellness and life skills like on nutrition and mental health, sexual health, and healthy relationships. And we pride ourselves on offering a safe space that is judgment-free and where everyone belongs.

6. Overall, NFBGC serves 1,400 members annually and has delivered nearly 600,000 hours of programming per year, helping young people stay out of trouble. We work with 12 other club organizations in Western New York to accomplish our goals.

7. Our membership agreement requires young people and families to agree to respect each other, engage in positive behavior, and create an environment that is safe and inclusive for all. This means that we are supportive and respectful of all people, including lesbian, gay, bisexual, transgender, questioning and queer (“LGBTQ”) youth, youth of other races and ethnicities, religions, and various economic statuses.

8. NFBGC is also a member of the national Boys and Girls Clubs of America (“BGCA”) Network, which on a national level is also committed to inclusivity and supporting all young people, including LGBTQ youth, by fostering a sense of belonging and providing a safe environment for them. NFBGC also commits to these same principals in all our work.

9. In our employee handbook, we state that all employees are entitled to work in an environment free from discrimination and harassment protected by law, including on the basis of gender identity and transgender status.

10. In our organization’s policies, we mandate that staff and volunteers cannot discriminate or harass children for identifying as LGBTQ and must treat children consistent with their gender identity. We investigate and take appropriate action on all complaints of discrimination or harassment.

11. NYSDOH is a Title V SRAE grantee. NFBGC obtains SRAE funding for one of our programs from NYSDOH. We applied to be a subgrantee of NYSDOH’s Title V SRAE funds and were awarded the grant last year to administer our Teen Outreach Program (“TOP”). We have a close relationship with the grant administrators. This is our second year with the grant.

12. Each quarter, we submit claims for the costs of the program after an initial 20 percent advance. There are weekly meetings with NYSDOH and the other grantees who have received the SRAE funding to receive technical assistance and support. We submit data about how far we have come in our grant reporting and grant objectives periodically. Last year, we were proud to report that we served 201 children and expect to serve approximately the same number this year as well. To accomplish our goals, we partner with seven other clubs in the Western New York region.

13. As part of its work, NFBGC administers medically accurate and complete, age-appropriate educational programming to New Yorkers ages 10-13 as part of our TOP program. Instruction in this program encourages our participants to avoid non-marital sexual activity with the goal of reducing pregnancy, HIV and other sexually transmitted infections (“STIs”), and birth rates. This work is funded almost exclusively by Title V SRAE and helps young New Yorkers make healthy decisions.

14. NFBGC, commiserate with our mission and vision, works in communities that lack social and economic opportunities to enable teens to develop their full potential and make healthier decisions to avoid teen pregnancy and disputes that could escalate into criminal activity. We help divert young people from the juvenile criminal justice system by offering them alternatives means to resolve disputes and stay out of trouble.

15. Each year, we receive \$275,000 in Title V SRAE funding to provide these services. In total, we plan to receive a cumulative total of \$1.375 million dollars Title V SRAE funding pursuant to our contract with NYSDOH that is set to expire on June 30, 2029.

16. Our programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and recognizes the experiences of youth from diverse communities, backgrounds, and experiences, including LGBTQ youth. Our programming focuses on normalizing the optimal health behavior of avoiding non-marital sexual activity and teaching personal responsibility, healthy decision-making, healthy relationships, and other topics. Additionally, our programs use positive youth development principles when offering trauma-informed prevention programming and help young people make healthy choices to delay and mitigate risks related to sexual activity.

17. TOP operates under a set of policies and requirements aimed at respecting young peoples' confidentiality, ensuring safety, and fostering an inclusive environment, in line with best practices of youth development. The TOP requirements include, but are not limited to, listening to the young person, using affirming language and affirming their asserted name and pronoun and identity, and avoiding negative stereotypes. TOP specifically mandates that if a child opens up about being LGBTQ during a session, we respond in a non-judgmental manner to ensure the child feels accepted and safe and can continue participating in the program on equal terms as other children. TOP facilitators are encouraged to direct conversations with young people away from negative stereotypes of groups, including LGBTQ groups, and to normalize diversity and prevent stigmatization of any group, including LGBTQ people. The program also connects marginalized students to resources, including LGBTQ resources such as LGBTQ centers or suicide prevention hotlines. Further, we have a contract with a licensed mental health social worker who can provide additional support to young people who are at risk so they can stay in the program and take full advantage of everything TOP has to offer.

Effectiveness of programs

18. As part of its work administering state education programming, we measure the effectiveness of TOP in multiple ways. We administer pre- and post-surveys before and after the program to measure growth. The surveys ask a variety of questions to determine how the young person feels about their decision making and the types of decisions they have made. We also review surveys provided to parents and guardians that measure whether they have noticed a difference in their child or their relationship with the child due to the program. We talk to the children's schools to determine if participation in our program has led to any negative or positive impact on their behavior. We also measure the success of the program by tracking the number of

students who continue to engage in our program's activities and talking to TOP staff to determine how the program is going and whether anything needs to change to improve effectiveness.

19. I know our program has already been very effective. Since we started, we have immediately seen a significant positive impact on our children. To make sure young people who lack support receive as many services as possible to reduce teen pregnancy and other goals for social and emotional learning, we focus on working with children from less resourced communities. Parents in the program have reported to me that that their children have had fewer behavioral issues, and the schools have reported the same. For example, in our first year administering TOP, parents expressed that while they had previously had a hard time discussing life choices with their pre-teen, their child became more open to discussing this topic and has had fewer behavioral issues after participating in TOP program. Parents also reported that their children ate healthier, were less likely to make poor decisions about their sexual health, more engaged in daily life, expressed a sense of having a safe space, and made healthier choices overall because of our program. When speaking to the teachers about these children, they reported that the students in our program have improved academically and socially. Overall, I know from personal and professional experience that because the young people in our program are having fun and fully engaged in the programming, they are less likely to get in trouble or make unhealthy decisions. I have noticed children have kept coming back for more programming, including older children, which is further evidence of the success of the program.

Harms to NFBGC from the Gender Conditions

20. I have recently learned that the federal government is attempting to impose new terms and conditions on SRAE programs funded through NYSDOH that would restrict federal

financial assistance if content concerning “gender ideology” is not removed (the “Gender Conditions”).

21. NFBGC is currently experiencing and will continue to experience harm as a result of the Gender Conditions. The threat to impose the Gender Conditions on SRAE grantees has created immense confusion and negatively impacts our organization’s ability to plan for the future.

22. The federal government’s threat to New York to restrict federal financial assistance if content concerning “gender ideology” is not removed puts at risk the full amount of NFBGC’s annual award of \$275,000 a year in Title V SRAE funding and the nearly \$1.375 million dollars it stands to receive for the full contract term. This would have a catastrophic effect on NFBGC’s work.

23. For example, our Title V SRAE grant covers the salary of two full time employees and 14 part time employees at NFBGC. With the uncertainty of the Title V SRAE grant’s continuation, our organization is being forced to contemplate terminating and reducing these valuable employees’ positions.

24. If the funding ended, we would need to lay off three staff members right away. We would need to reduce another 13 staff members’ hours by 50 percent, if not more. In particular, the health educator supervisor position would be cut. The health educator supervisor has played an integral role in educating entry level staff on creating an inclusive environment by providing real-time coaching and mentoring to other staff members so they can support all of our young people, including LGBTQ youth. This loss would be detrimental and decrease the cultural competency of our remaining staff and specialized support for vulnerable children, negatively impacting the number of young people we can adequately support.

25. To overcome this loss in funding, we would likely need to charge our club's older children a fee to participate in our programming to continue normal operations. This would have a detrimental effect on teens and the countless low-income families that we serve.

26. From my own personal and professional experience, I know that when you reduce the safe places where young people can go, they may make worse decisions that can lead to detrimental effects on themselves, their families, and our communities. TOP focuses on young people who are most at-risk, providing support for the most socially isolated children. Without TOP, our youth participants over 12 would lack adequate supervision and support during the afterschool hours when their parents are still working and adult supervision is otherwise unavailable. Reducing TOP's hours and programming would adversely affect these students' academics and school performance. These youth would also be more prone to wander the streets of our city, potentially leading to criminal activity, harmful sexual activity, and exposure to unhealthy or risky situations. Without adequate supervision, our youth participants are at an increased risk of drug use, teen pregnancy, and other harmful outcomes that would increase the pressures faced by them and their families. If the child gets involved in criminal activity, the parents will lose work hours and income to support them while attending court. If children do not have a safe place to go or social-emotional supports, they are more likely to become truant or have school issues, leading to further degradation of their life and chance of success. Reduction in our services would therefore have a harmful impact for the entire community.

27. Losing this program will have a negative effect on the lives of our youth and our community. People in our program are less likely to experience juvenile detention and teen pregnancy. By decreasing adverse health outcomes and incidents of juvenile detention, TOP

reduces community spending on healthcare and incarceration. Thus, losing this program will mean an increased cost to the community of Niagara Falls and will harm youth.

28. To comply with the Gender Conditions NBGC would be forced to discriminate against LGBTQ young people by ignoring and not respecting their gender identity or their sexual orientation. This is in conflict with the laws of New York, which mandate that as a public accommodation, we are not allowed to discriminate against the LGBTQ community.

Harms to NBGC

29. If NBGC loses Title V SRAE funding, NBGC would be unable to meet its obligations to provide age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. Youth in New York, especially high-risk youth, will suffer.

30. If we lose the funding, it will impact all children but especially LGBTQ children. We estimate that about 20 percent of the youth in our TOP program identify as LGBTQ. Approximately 15 percent of our staff at NBGC identify as LGBTQ and many of them work in the TOP program. Thus, it is safe to say that staff and participants who identify as LGBTQ would be directly harmed by these restrictions. When I saw the Gender Conditions, I did not know how we would continue to operate. We would potentially need to dedicate significant resources to policing what we say and how we work. We would likely need to change many of our policies. All of this would distract us from helping young people develop and grow into adults and make healthy life decisions. Further, these new conditions conflict with our values, our policies, our mission statement, and the principals of our national organization. If we were forced to agree to the Gender Conditions, it would cause great harm to the community and to our identity as an organization committed to helping all children, regardless of race, sex, gender, transgender status,

or other protected statuses. It would be very difficult, if not impossible, to provide inclusive services to certain children at NBGC while complying with these new restrictions. It is against our values to reject children for who they are, or to deny them information that is medically accurate and affirming to their identities. We do not discriminate. We accept LGBTQ youth in our care. We want to provide support to everyone.

31. As a specific example that brings this point across in which we had a successful intervention with a young person in our care that would not have happened without TOP funding and SRAE. An LGBT student come to us because the student was being bullied and harassed due to the student's identity, causing significant harm. The student expressed that the student was suicidal and did not want to live anymore. The student was isolated and not involved in any activities, and had limited friends or social activities that felt positive. The student was allowed to come to our TOP program and began attending our after-school program. We dedicated resources to the student during TOP to make sure the student felt like the student belonged and was welcomed as the student identified. We provided wrap-around services to this student and helped the student have not only positive role models, but people who supported the student. We offered the student services to be treated respectfully, rather than being ostracized or treated like an anomaly. The student went back to school and reported feeling more welcomed and encouraged to overcome more challenges. The student also knows how to address the bullying and harassment the student experienced at school and what resources will help the student successfully do so.

32. Without this grant, we would not have been able to support this student and the student likely would have had a more difficult time surviving the bullying and discrimination, or worse. A staff member in our program, the health educator supervisor, was the main staff member

who helped connect the student to services and provided crucial support to the student. Without TOP, this position would not exist.

33. At the same time, this example shows that if TOP had not been able to acknowledge the student's identity or provide these services in a supportive and non-judgmental way, we would not have been able to support this student in achieving these positive outcomes in the same way. Being able to acknowledge and accept students' identities in a supportive and non-judgmental environment is critical in enabling TOP to achieve its mission to help all children. Preventing it from doing that would be contrary to our mission and would harm the at-risk youth and communities we serve.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 25, 2025, at Niagara Falls, New York.

s/ Rebecca Vincheski

REBECCA VINCHESKI

Chief Executive Officer
Niagara Falls Boys and Girls Club

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF MICHELLE DAVIS

**DECLARATION OF MICHELLE DAVIS, NEW YORK STATE DEPARTMENT OF
HEALTH REPRESENTATIVE**

I, Michelle Davis, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of New York. I am over the age of 18 and competent to testify as to the matters herein.

2. I am the Deputy Commissioner of the Office of Public Health (OPH), within the New York State Department of Health (NYSDOH). I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief in the above case, which challenges new conditions the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) has placed on funding provided under the Personal Responsibility Education Program (PREP) and the Sexual Risk Avoidance Education (SRAE) program. Specifically, the States challenge the August 6, 2025 Notice of Award (NOA) regarding state PREP grants; the August 7, 2025 PREP Supplemental Terms and Conditions (PREP Supplemental T&Cs); the August 26, 2025 directive letter (PREP Directive) from ACF to NYSDOH; the August 6, 2025 NOA from HHS ACF regarding state SRAE grants; and the August 7, 2025 SRAE Supplemental Terms and Conditions (SRAE Supplemental T&Cs) (collectively, "PREP and SRAE Gender Conditions").

3. I am familiar with the information in the statements set forth below either through personal knowledge, in consultation with NYSDOH staff, or from documents that have been provided to and reviewed by me.

4. I have served as the Deputy Commissioner of OPH since April 10, 2025, and have over thirty (30) years of public health experience, serving at the local, county, state and territorial levels. I have held five (5) executive public health positions including my current position. These roles include: Deputy Health Commissioner for Policy and Planning for the City of Philadelphia,

Deputy Secretary for Health for Policy and Planning for the Commonwealth of Pennsylvania, Senior Executive Service within the U.S. Department of Health and Human Services for the Office of the Secretary, and Health Commissioner for the U.S. Virgin Islands.

5. I have worked in and managed across a broad portfolio of public health areas. Within HHS, I spent ten (10) years with the Centers for Disease Control and Prevention (CDC) as an epidemiologist and statistician developing surveys, analyzing data and training individuals how to collect and analyze data for program development and management. The CDC also assigned me to serve as the Director of Maternal and Child Health within one of our nation's health departments. As the Health Commissioner of the U.S. Virgin Islands, I oversaw most of the same programs that are conducted by NYSDOH, including those related to health education.

6. I attended the University of Michigan where I received a bachelor's degree in psychology with minors in biology and secondary education. After graduating from college, I worked as a laboratory microbiologist and a science teacher. I received a master's degree in epidemiology, with minors in statistics, and health policy from the University of South Carolina School of Public Health. With my graduate training in epidemiology, statistics and health policy, I have conducted research, written and published journal articles, and developed policy guidance at the federal level in the areas of sickle cell disease, language access, performance measures, and data utilization among other areas.

7. NYSDOH's stated mission is "to protect and promote health and well-being for all, building on a foundation of health equity." The OPH is responsible for a broad portfolio of essential public health activities in New York State to achieve this mission, such as communicable disease control, immunizations, family health, chronic disease prevention, local public health

practice, nutrition programs, drinking water safety, injury and violence prevention, and environmental health and food safety.

The PREP Grant Program

8. The Personal Responsibility Education Program is a federally funded grant authorized by 42 U.S.C. § 713 and administered by HHS Family and Youth Services Bureau (FYSB), an office of the ACF. NYSDOH has applied for and received funding under the formula grant program since its inception in 2010, with the current grant cycle set to end September 30, 2027.

9. In New York, NYSDOH primarily uses PREP funding to support provision of comprehensive, evidence-based educational programming to reduce pregnancy, HIV and other sexually transmitted infections (STIs), and birth rates for youth provided by seven not-for-profit sub-grantee agencies. Across the State, approximately 2,000 youth are served each year by the programs NYSDOH implements with PREP funding.

10. NYSDOH has contracts with seven community-based organizations to administer PREP funds and it relies on these partners to implement evidence-based sex education and personal responsibility curricula in local communities across our state. The seven PREP sub-grantees were chosen via a competitive procurement mechanism: each had to meet set eligibility requirements, that included having served New York State youth in areas with high adolescent sexual health needs. These seven contracts total \$2,024,894 and have a contract term of October 1, 2023, through September 30, 2028, with three years remaining in the current contract cycle. These organizations employ staff to provide an array of community-based programs that utilize a youth development framework and implement evidence-based or best practice strategies to promote adolescent health

and reduce risk for youth (ages 10-19). They work in communities that lack social and economic opportunities to enable teens to develop to their full potential.

11. New York's seven PREP sub-grantees use one or both of two curricula: "Be Proud! Be Responsible!" and "Making Proud Choices". Approved by ACF, the two curricula were carefully evaluated and chosen by NYSDOH because they are evidence based and were specifically designed for the population that the PREP program served. "Be Proud! Be Responsible!" is a safer sex approach to HIV prevention and was developed to reach high school students in a school or community-based environment. "Be Proud! Be Responsible!" is designed to help adolescents develop the knowledge, skills, and motivation necessary to change their behaviors in ways that will reduce their risk of contracting HIV and other sexually transmitted infections. "Making Proud Choices!" is a safer sex approach to teen pregnancy and HIV/STI prevention and was developed to reach adolescents in a school or community-based environment. "Making Proud Choices" is designed to help participants develop the knowledge, skills, and motivation necessary to change their behaviors in ways that will reduce their risk of contracting HIV and other STIs.

12. NYSDOH also utilizes PREP funding to support Assets Coming Together for Youth: Center for Community Action (ACT) at Cornell University, which develops training, capacity building and evaluation services for PREP providers, along with SRAE and Comprehensive Adolescent Pregnancy Prevention program (CAPP) providers.

13. NYSDOH also uses PREP funding to partially fund the Behavioral Risk Factor Surveillance System (BRFSS), which maintains data that monitors modifiable risk behaviors that lead to morbidity and mortality collected through an annual statewide telephone survey.

14. When applying for PREP grants, NYSDOH has complied with the programs' application requirements, which include assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the specified population group to which the programming is directed, and targeted towards high-risk youth. NYSDOH ensures that PREP programming addresses both abstinence and the use of contraception, as well as at least three of six "adulthood preparation subjects" as described in 42 U.S.C. § 713(b)(2)(C).

15. NYSDOH has provided ACF reporting on NYSDOH's and subcontractor PREP activities repeatedly since its inception, including use of the current materials and curricula. NYSDOH last provided certification to ACF of its compliance with PREP requirements on August 13, 2025.

PREP Funding Received by New York State Department of Health

16. In 2010, New York submitted a PREP grant application in response to ACF's Funding Opportunity Announcement, at the inception of the program. For the past fifteen (15) years, New York has submitted a letter of intent packet to re-authorize PREP grants annually. ACF extends funding to grantees for three-year grant terms. New York applies for a new grant each year, resulting in overlapping awards. ACF has issued to NYSDOH three currently active awards covering the three project periods: from October 1, 2022, through September 30, 2025; October 1, 2023, through September 30, 2026; and October 1, 2024, through September 30, 2027. For the first project period, ACF awarded \$2,633,414 in PREP funding to NYSDOH (the "FY2023 PREP Award"). The Terms and Conditions of 2023 PREP Award state that PREP programs must provide "programming to youth populations that are the most high-risk or vulnerable for pregnancies and sexually transmitted infections, including HIV/AIDS, or have other special circumstances including culturally underrepresented youth populations such as . . . youth who identify as lesbian,

gay, bisexual, transgender, and /or questioning (LGBTQ+), and other vulnerable or underserved youth populations.” The NOA for the FY2023 PREP Award is attached as Exhibit A. For the second project period, ACF awarded \$2,809,003 in PREP funding to NYSDOH (the “FY2024 PREP Award”). For the third project period, ACF awarded \$2,814,290 in PREP funding to NYSDOH (the “FY2025 PREP Award”). The NOA for the FY2025 PREP Award is attached as Exhibit B.

17. NYSDOH is currently operating using FY2023 PREP Award and FY2024 PREP Award funds and has not yet drawn down the FY2025 PREP Award funds. As of September 18, 2025, an estimated \$583,333 remains undrawn from NYSDOH’s FY2023 PREP Award and \$2,520,520 remains undrawn from NYSDOH’s FY2024 PREP Award. It is estimated that, if the 2025 PREP Award was not accepted, NYSDOH would forfeit the full 2025 PREP Award value of \$2,814,290. NYSDOH has not yet been notified that a letter of intent is needed for the next annual award. However, given the statutory allotment to each State under the PREP authorizing statute, 42 U.S.C. Section 713, NYSDOH anticipates that future annual awards could also be impacted with lost funds estimated at approximately \$2.7 million per future award (exact amount determined by formula).

18. The NYS Office of the State Comptroller (NYSOSC) submits draw requests for PREP on an irregular basis through the federal Payment Management System (PMS). PMS is the federal government system used by ACF to process grant payments for PREP. NYSOSC is made aware of the need to submit a draw request when expenditures are posted in the New York State Statewide Financial System (SFS). NYSOSC runs a daily report to identify expenditures that have posted since the last report. There could be a lag of two or more days between NYSOSC’s draw request in PMS and when the federal sponsor approves the draw request and the federal funds are

actually drawn. As of September 18, 2025, NYS is awaiting approval from ACF for previously submitted draw requests.

19. Even assuming NYSDOH was willing to attempt to comply with the PREP and SRAE Gender Conditions, there would be no way NYSDOH could ensure compliance, including compliance by each of its sub-grantees, before drawing down funds without causing severe disruption to the agency and the subgrantees which rely on those funds for their ongoing operations.

20. Draw requests are typically for work that has already been performed. NYSDOH has continued to draw down funds from the FY2023 and FY2024 PREP and SRAE grants to meet its payroll and other pending requests on the understanding that the Gender Conditions cannot lawfully be applied to unspent funds from those prior grant periods. Further, to the extent the agency makes any request to draw down funds from any PREP or SRAE grant in compliance with the requirements of the PREP and SRAE Gender Conditions, NYSDOH states that the submission of this documentation in no way constitutes agreement with the PREP and SRAE Gender Conditions, which are currently subject to litigation in the above-captioned case, and reserves all rights to pursue any and all relief. All NYSDOH's current and future certifications and affirmations related to the PREP and SRAE grants are made subject to this reservation of rights.

21. The PREP program includes State payroll expenses such as salaries, fringe, and indirect; non-personnel services expenses such as travel, contracts, equipment, and supplies; grant contracts; and transfers. State payroll expenses are automatically paid on a regular recurring basis, with expenditures posting in SFS on a bi-weekly basis. Ad hoc adjustments may also post in SFS at various times. Non-personnel services, grant contract expenses, and transfers are paid on an irregular basis, depending on when obligations are invoiced and NYSDOH deems the expense

reasonable and allowable under the program. There is no set schedule for these expenditures. Grant contractors invoice quarterly, but the timing of invoice submission and the determination to pay are variable. There is also a lag between when expenses are approved by NYSDOH for payment and when the expenditure posts in SFS as expenses may go through additional layers of review from other State entities and are subject to SFS processing timeframes.

Communications from Federal Government Regarding PREP and “Gender Ideology”

22. On or about April 14, 2025, NYSDOH received via e-mail a letter from ACF FYSB’s Division of Positive Youth Development indicating that ACF was performing a “medical accuracy review” and requesting submission of “any current curricula and programmatic materials” related to state PREP grants. FYSB stated that the “purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete.”

23. As requested, NYSDOH submitted all PREP curricula and materials on April 22, 2025. This included the “Be Proud! Be Responsible!” and “Making Proud Choices” curricula utilized by sub-grantees as well as the approved adaptations the sub-grantees made to tailor this programming to local populations.

24. On August 7, 2025, NYSDOH downloaded a copy of the NOA for the FY2025 PREP Award, dated August 6, 2025, describing the financial information associated with New York’s 2025 PREP Award. On August 20, 2025, NYSDOH also received a copy of the FY2025 PREP NOA via e-mail from the Federal Project Officer. The August 6, 2025 PREP NOA states, “[t]he use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the August 6, 2025 PREP NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the PREP

program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405."

25. On August 7, 2025, ACF published Supplemental Terms and Conditions applicable to PREP awards and award modifications that add funding. The PREP Supplemental T&Cs prohibit grant recipients from including so-called "gender ideology" in PREP-funded programs and services.

26. Per ACF's notice, these PREP Supplemental T&Cs are effective immediately. Per the August 6, 2025 PREP NOA and the PREP Supplemental T&Cs, the "gender ideology" terms and conditions of the PREP NOA, and PREP Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. NYSDOH has not used any funds awarded under the August 6, 2025 PREP NOA.

27. The Notice of Award is an agreement between the federal sponsor and the recipient in which the federal sponsor agrees to reimburse the recipient up to the value awarded in the NOA for activities outlined in the recipient's program plan. The reimbursement transaction is colloquially called a "draw." This transaction is the actual disbursement, or use, of federal funds.

28. On August 26, 2025, NYSDOH received the PREP Directive via e-mail from ACF stating that New York's "current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations, and that the curricula and program materials must be

modified” because they include “gender ideology.” The identified content, ACF claims, is “outside of the scope of PREP’s authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials.” ACF further instructs New York “**to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter**” (emphasis in original). ACF asserts that it may take “additional enforcement action,” and lists as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.” The PREP Directive is attached as Exhibit C.

29. The portions of the “Be Proud! Be Responsible” curriculum’s Facilitator Manual the PREP Directive specified as non-compliant include the following:

A guideline that facilitators should “Demonstrate acceptance and respect for all participants, regardless of personal characteristics, including race, cultural background, religion, social class, sexual orientation or gender identity.”

A guideline that “participants may roleplay sexual pressure situations with someone of a different or the same gender. This may be awkward for straight teens who are sensitive to the suggestion of same-sex romance, for teens who identify as gay or lesbian, or for teens who are transgender or gender nonconforming. It’s important to address this situation directly and proactively.”

30. The portions of “Making Proud Choices,” 5th Edition curriculum Facilitator Manual the PREP Directive specified as non-complaint include the following:

“Facilitator’s Note: Asking participants to tell you their pronouns is a way of creating a safe space for transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns and thus “outing” themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or zir. Pronouns don’t always line up with what observers might expect based on a person’s perceived biological sex. The simple act of requesting pronouns sends the message that transgender and gender nonconforming youth are welcome and respected in the group.”

The following suggested procedure for one of the activities:

“Respect diversity: Let’s keep in mind that there’s diversity in society and in the group. Individuals come from different family backgrounds, different racial and cultural groups and different living situations. Some young people have already had romantic relationships; others aren’t even thinking about it. Some have had sexual intercourse. Some have had sex because they choose to; other’s may have had sex against their will. Some may identify as gay, lesbian, bisexual or straight. Some may identify as male, female or transgender.

Young people may express themselves in ways that don’t conform with their biological sex. There are many ways that youth can express their gender identity. .

..

Define terms related to diversity as needed.

I want to be sure everyone understands some of the terms we use when talking about diversity. Gender refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel.

Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another.

Gender identity is peoples’ inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn’t fit these labels. It may be the same as (cisgender) or different from (transgender) the sex they were assigned at birth. Gender identity is unique for each person.

Gender expression is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics” (emphasis in original).

The SRAE Grant Program

31. The SRAE Program is a federally funded grant authorized by 42 U.S.C. § 710 and administered by HHS FYSB, an office of the ACF. NYSDOH has applied for and received funding under this grant program since at least 2018, with the current grant cycle set to end September 30, 2026.

32. NYSDOH utilizes SRAE funding to support evidence-based sex education that focuses on delaying the onset of adolescent sexual activity, preventing sexual abuse, coercion, and

decreasing the incidence of adolescent pregnancy. NYSDOH contracts with municipalities and community-based non-profit organizations to provide this instruction to youth throughout the state. In applying for Title V SRAE grants, NYSDOH has complied with the program's application requirements, which include assurances that programming be evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed, and recognizes the experiences of youth from diverse communities, backgrounds, and experiences. The programming focuses on normalizing the optimal health behavior of avoiding non-marital sexual activity and teaching personal responsibility, healthy decision-making, healthy relationships, and other topics as described in 42 U.S.C. § 710(b)(3). In its grant applications, NYSDOH also addresses how New York uses positive youth development principles when offering trauma-informed prevention programming.

33. NYSDOH partners with eleven non-profit organizations and municipalities to administer these SRAE funds and implement evidence-based sex education. These eleven contracts total \$3,025,000 annually and have a contract term of July 1, 2024, through June 30, 2029. Like PREP sub-grantees, SRAE sub-grantees employ staff to provide an array of community-based programs that utilize best practice strategies to promote adolescent health and reduce risk for youth (ages 10-13). They work in communities that lack social and economic opportunities to enable teens to develop to their full potential. Through the use of SRAE funding, those organizations provide evidence-based sex education to approximately 1600 youth across the State annually.

34. As with PREP funding, NYSDOH also utilizes SRAE funding to support ACT, which provides training, evaluation, and capacity building services to SRAE community-based providers and instructors.

SRAE Funding Received by NYSDOH

35. New York first submitted an SRAE grant application in response to ACF's Funding Opportunity Announcement in 2018, at the inception of the program. For the past 7 years, New York has submitted a letter of intent packet to re-authorize SRAE grants annually. ACF extends funding to grantees for two-year grant terms. New York applies for a new grant each year, resulting in overlapping awards.

36. ACF has issued to NYSDOH two currently active SRAE awards covering the two project periods, from October 1, 2023, through September 30, 2025, and October 1, 2024, through September 30, 2026. For the first project period, ACF awarded \$3,752,726 in SRAE funding to NYSDOH ("FY2024 SRAE Award"). For the second project period, ACF awarded \$3,656,266 in SRAE funding to NYSDOH ("FY2025 SRAE Award"). NYSDOH has not yet been notified that a letter of intent is needed for the next annual award. However, given the statutory allotment to each State under the SRAE authorizing statute, 42 U.S.C. § 710, NYSDOH anticipates that future annual awards could also be impacted with lost funds estimated at approximately \$3.7 million per future award (exact amount determined by formula). As with PREP grant awards, the NOA for SRAE is an agreement between the federal sponsor and the recipient in which the federal sponsor agrees to reimburse the recipient up to the value awarded in the NOA for activities outlined in the recipient's program plan. The SRAE program includes the same type of expenses as the PREP program, including State payroll expenses such as salaries, fringe, and indirect; non-personal services expenses such as travel, contracts, equipment, and supplies; grant contracts; and transfers. The reimbursement process for SRAE draw requests is the same as the process for PREP, described

in paragraphs 17-19 above, including the same time periods for submitting and processing draw requests.

Communications from the Federal Government Regarding SRAE Awards and “Gender Ideology”

37. On August 7, 2025, NYSDOH downloaded a copy of the SRAE NOA dated August 6, 2025, describing the financial information associated with New York’s SRAE grant award funds. The August 6, 2025 SRAE NOA states, “[t]he use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the SRAE program under which this grant has been awarded, at 42 U.S.C. § 710, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one’s sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.” The August 6, 2025 SRAE NOA is attached as Exhibit D.

38. On August 7, 2025, ACF published SRAE Supplemental T&Cs applicable to SRAE awards and award modifications that add funding. The SRAE Supplemental T&Cs prohibit grant recipients from including so-called “gender ideology” in SRAE-funded programs and services. Per ACF’s notice, these SRAE Supplemental T&Cs are effective immediately.

39. New York’s SRAE curricula and materials include references to gender identity. Some examples include: utilizing gender-neutral terms; including positive examples of diverse

LGBTQ relationships; mentioning gay and lesbian teens; referencing sexual orientation; and stressing acceptance of sexual orientation and gender identity. In other words, the curriculum is intentionally sensitive toward, responsive to and does not exclude the diverse experiences and needs of LGBTQ youth and families.

40. NYSDOH has not drawn any funds awarded under the FY2025 SRAE Award. However, the FY2024 SRAE Award's project period ends September 30, 2025, and obligations must be liquidated within 120 days according to the Notice of Award issued for FY2024 SRAE Award. Accordingly, NYSDOH anticipates having to draw down federal funds imminently in order to meet its obligations.

Harms to New York of Losing PREP and SRAE Funding

41. New York is currently experiencing and will continue to experience harm as a result of the PREP and SRAE Gender Conditions. The PREP and SRAE Gender Conditions have created immense confusion for NYSDOH, its PREP and SRAE sub-grantees, and partners. NYSDOH's ability to budget and plan for the future is severely negatively impacted.

42. The loss of PREP and SRAE funds to NYSDOH would have immediate consequences. Without the uninterrupted funding of PREP and SRAE grants, NYSDOH and its PREP and SRAE sub-grantees will lose critical capacity that has enabled them to provide age-appropriate and medically accurate education to youth. As a result, adolescents currently served by the grantees, approximately 2,000 young people per year, would lose access to evidence-based prevention programming. Youth in New York, especially high-risk youth who are at particular risk of becoming pregnant or contracting HIV and other STIs, will suffer. This would likely result in an increase in teenage pregnancy rates and rates of STIs. The increased costs of treating those teens

would be borne by the state through increased costs to its Medicaid program, its public hospitals and clinics, and across the public benefits system as a whole.

(a) PREP Funding Loss

43. Unless New York furnishes updated curriculum complying with the PREP Directive by October 27, 2025, NYSDOH anticipates losing the full amount of the PREP Award for the project period of October 1, 2024, through September 30, 2027, totaling \$2,814,290 effective on or around that date. *See* PREP Directive attached as Exhibit C (asserting ACF may take “additional enforcement action,” and lists as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.”).

44. The imposition of the PREP and SRAE Gender Conditions also puts at risk, on average, a projected \$2.7 million in anticipated future funding for the project period between October 1, 2025 and September 30, 2028. Future annual awards could also be impacted with lost funds estimated at approximately \$2.7 million per future award (exact amount determined by formula). There is also \$3.1 million remaining in FY2023 PREP Award and FY2024 PREP Award funding that has not yet been drawn as of September 18, 2025.

45. Loss of PREP funds could result in termination of staff positions both within NYSDOH and at the PREP sub-grantees that provide the funded services. NYSDOH’s PREP grants cover the salaries of two full-time employees. With the uncertainty of the PREP grant’s continuation past October 27, 2025, NYSDOH is forced to contemplate reducing or terminating these two positions.

46. NYSDOH also faces the likelihood that it will have to terminate awards to the seven PREP sub-grantees with which it contracts to provide comprehensive, evidence-based educational programming. These seven existing PREP contracts would be terminated as of October 27, 2025, and contracted sub-grantees would have 30 days to reconcile expenses and close out the contracts.

Up to 28 staff employed by these nonprofit sub-grantee organizations would be at risk of layoff. Fourteen full-time employees funded at 100% and another 14 are partially funded by these subawards.

47. PREP also increases access to reproductive health care services, mental health services and an array of other social services, such as support for substance abuse, alcohol abuse, tobacco cessation and dealing with instances of intimate partner violence, among others. During the latest reporting period, NYSDOH's seven PREP sub-grantees made a total of 160 referrals for youth, including for: reproductive health services (77), mental health (13), social-emotional wellness (19), substance abuse counseling (one), nutrition (e.g., food pantry, soup kitchen) (four), employment services (six), additional support services (three), primary / dental health services (14), other health and wellness services (five), and other youth-serving organizations. Those referrals connecting youth to vital services would be drastically reduced as a result of the loss of funding and resulting reduction in capacity at sub-grantee organizations.

48. Additionally, given that this is all occurring at the beginning of the 2025-2026 school year, the termination of these awards and loss of staff would haphazardly interrupt student education and engagement already commenced by these sub-grantees. For example, we are aware of at least one sub-grantee program that is currently running educational programming with a total of 62 youth participants that is not scheduled to be completed until mid-November. Based on our agreements and workplans, additional subgrantees are expected to begin additional cohorts in the fall. Our providers also have relationships with the school districts and other community-based organizations in their area which will be negatively impacted should the subgrantees be forced to cease their programming mid-cycle.

49. Finally, partial recurring annual funding support for the Cornell University-based ACT program may be terminated, likely reducing the contract's budget and scope. This contract provides crucial training, capacity building, technical support, and evaluation services to PREP, SRAE, and CAPP providers and has 2.25 years remaining in the current 5-year contract cycle. PREP and SRAE support \$900,000 of the \$1.1M annual contract allocation. Reductions to ACT would greatly limit the capacity of PREP, SRAE, and CAPP instructors and thus reduce the effectiveness of New York's health and sex education programming.

(b) SRAE Funding Loss

50. Likewise, failure to comply with the PREP and SRAE Gender Conditions will likely result in NYSDOH losing the full 2025 SRAE Award grant amount, \$3,656,266., as well as approximately \$3.7 million in projected future SRAE funding for the project period October 1, 2024, through September 30, 2026, and any additional future awards based on the statutory allotment to each State under the SRAE authorizing statute, 42 U.S.C. § 710. There is also \$1,309,992 remaining in NYSDOH's FY2024 SRAE Award funding that has not yet been drawn as of September 18, 2025.

51. Loss of SRAE funding could result in termination of staff positions within NYSDOH. NYSDOH's SRAE grants cover the salaries of two full-time NYSDOH employees. With the uncertainty of the SRAE grant's continuation, NYSDOH is forced to contemplate reducing or terminating these two positions.

52. Similarly, if NYSDOH failed to comply with the PREP and SRAE Gender Conditions, NYSDOH would be put in the untenable position of terminating the eleven existing SRAE sub-grantee contracts and the funds already awarded therewith, possibly impacting the employment of 58 employees at those sub-grantee organizations, 19 of whom are full-time employees whose positions are fully funded by the SRAE grant funds.

53. Additionally, as with the PREP sub-grantees, the termination of these awards and loss of staff would undoubtedly interrupt the sub-grantee's ongoing educational programs. Currently, there are at least 2 SRAE sub-grantees that are running educational program with a total of 67 youth participants.

Harms to New York of Complying with the PREP and SRAE Gender Conditions

54. Conceding to the PREP and SRAE Gender Conditions by removing the identified language would also be extremely detrimental to the mental health and well-being of young people who participate in these programs. Every year, thousands of young New Yorkers rely on PREP and SRAE to provide adolescents a safe space to prepare for adulthood; it allows them to by learn about healthy relationships and healthy life skills while relying on PREP instructors for connections to vital health care, services and supports. These curricula and programs were carefully and intentionally chosen to reflect the diversity of young people in New York; altering them would interfere with NYS DOH's ability to effectively serve the most marginalized members of the community and could cause them further harms.

55. This negative impact would be particularly acute for LGBTQ+ adolescents in New York who face significantly higher rates of suicidal thoughts and attempts and experience discrimination at higher rates compared to their heterosexual and cisgender peers. In 2024, 39% of LGBTQ+ youth and 45% of transgender and nonbinary youth in New York considered suicide, 12% of LGBTQ+ youth and 13% of transgender and nonbinary youth reported attempting suicide, and 69% of LGBTQ+ youth have also reported experiencing discrimination based on sexual orientation or gender identity. And yet, 58% of LGBTQ+ youth who wanted mental health care were unable to get it. PREP and SRAE fill this gap by utilizing a positive youth development framework and evidence-based practices to promote the physical and mental health of LGBTQ+

youth and referring them to other service providers. The ability to recognize and affirm participants' gender and sexual orientation is fundamental to the programs' positive youth development framework.

56. The PREP and SRAE Gender Conditions confront NYSDOH with an impossible choice. Loss of these funds would deprive our residents of the crucial benefits of this programming. But censoring the curricula by removing all references to gender identity and gender roles would drastically decrease these programs' efficacy, harm the very communities the programs were designed to serve, and interfere with NYSDOH's ability to fulfil its mission "to promote and protect health and well-being for all, building on a foundation of health equity."

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 25, 2025, at Albany, New York.

s/Michelle Davis
MICHELLE DAVIS
Deputy Commissioner
Office of Public Health

Exhibit A



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2301NYPREP
FAIN# 2301NYPREP
Federal Award Date: December 9, 2022

Recipient Information

1. Recipient Name

HEALTH, NEW YORK DEPARTMENT OF
ESP Corning Tower - Room 1805

ALBANY, NEW YORK 12237

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1146013200R9

5. Data Universal Numbering System (DUNS)

806781340

6. Recipient's Unique Entity Identifier

F863WQVMZSK7

7. Project Director or Principal Investigator

Michael Acosta

michael.acosta@health.ny.gov

518-474-0535

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

Manolo Salgueiro

Supervisory Grants Management Specialist

manolo.salgueiro@acf.hhs.gov

202-690-5811

10. Program Official Contact Information

Jerry Milner

Program Authorizing Official

ACYF - Family and Youth Services Bureau

Milner.Jerry@acf.hhs.gov

111-111-1111

Federal Award Information

11. Award Number

2301NYPREP

12. Unique Federal Award Identification Number (FAIN)

2301NYPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Catalog of Federal Domestic Assistance (CFDA) Number

93.092

16. CFDA Program Title

Personal Responsibility Education Program

17. Award Action Type

New

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2022

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2022 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2025

\$2,633,414.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$2,633,414.00

*See Remarks

*See Remarks

End Date 09-30-2025

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

Manolo Salgueiro

Supervisory Grants Management Specialist

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2301NYPREP

FAIN# 2301NYPREP

Federal Award Date: December 9, 2022

Recipient Information

HEALTH, NEW YORK DEPARTMENT OF

ESP Corning Tower - Room 1805

ALBANY, NEW YORK 12237

Employer Identification Number (EIN): 1146013200R9

Data Universal Numbering System (DUNS): 806781340

Recipient's Unique Entity Identifier: F863WQVMZSK7

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2023,G99SU23	\$2,633,414.00	\$2,633,414.00	\$2,633,414.00	2301NYPREP	Formula

Terms and Conditions



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2301NYPREP

FAIN# 2301NYPREP

Federal Award Date: December 9, 2022

State PREP Terms and Conditions
FY2023

By acceptance of awards for this program, the grantee agrees to comply with the requirements included in both the General and Supplemental Terms and Conditions for this program.

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

PERSONAL RESPONSIBILITY EDUCATION PROGRAM
Catalog of Federal Domestic Assistance (CFDA) Program No. 93.092

APPLICABLE LEGISLATION, STATUTE, REGULATIONS

1. The administration of this program is authorized under Title V, Section 513, of the Social Security Act.
2. The program is codified at 42 U.S.C. §713.
3. The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards is located under 45 CFR Part 75. In accordance with 45 CFR §75.101 Applicability, this program must comply with 45 CFR Part 75 in its entirety. No exceptions were identified.
4. Additional applicable regulations and requirements can be found in the General Terms and Conditions for Mandatory: Formula, Block and Entitlement Grants.

COST SHARING OR MATCHING (NON-FEDERAL SHARE) OF PROGRAM FUNDING

5. This program has a Maintenance of Effort (MOE) requirement per Public Law 111-148 and Title V, Section 513(a)(5), of the Social Security Act. No payment shall be made to a State from the allotment determined for the State under this subsection or to a local organization or entity awarded a grant under 513(a)(4), if the expenditure of non-federal funds by the State, organization, or entity for activities, programs, or initiatives for which amounts from allotments and grants under this subsection may be expended is less than the amount expended by the State, organization, or entity for such programs or initiatives for fiscal year 2023 (or the fiscal year amended by subsequent Public Laws).
6. MOE is a statutory requirement where the State, local organization, or entities awarded under this grant is required, as a condition of eligibility for federal funding, to maintain its financial contribution to the program. MOE must be used to supplement not supplant federal funds with existing non-federal funds. State, local organizations or entities under this grant may not replace or supplant federal funds to meet program requirements.

FINANCIAL REPORTING

7. Federal funds awarded under this grant must be expended for the purposes which they were awarded and within the time period allotted.
8. The OMB approved Financial Reporting form for this program is the Financial Federal Report SF-425. The SF-425 is due annually and no later than December 30, which is 90 days after the end of each project period.
9. Funding (project) period and obligation period. In accordance with Title V, Section 513 of the Act, this program has a 3-year project/obligation period starting the first day of the Federal Fiscal Year, October 1, for which funds were awarded and ending the last day of the second following Federal Fiscal Year, September 30. Any Federal funds not obligated by the end of the respective obligation period will be recouped by this Department.
10. Liquidation period. In accordance with 45 CFR §75.309(b), all obligated Federal funds awarded under this grant must be liquidated no later than 90 days after the end of the funding/obligation period. Any Federal funds not liquidated by December 30 will be recouped by this Department.
11. Submission Methodology: All periodic SF-425 financial reports for all grant programs must be submitted electronically through the Payment Management System (PMS). Recipients must not submit duplicate copies either by mail, by fax or as an email attachment of any reports submitted.
12. Submission Schedule: Annual. Each annual financial report must be submitted within 90 days (i.e., no later than December 30) following the end of each Federal Fiscal Year.
 - a. An interim financial report (covering Year 1 of the project period) is due 90 days following the end of Federal Fiscal Year 1;
 - b. An interim financial report (covering Year 2 of the project period) is due 90 days following the end of Federal Fiscal Year 2;



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2301NYPREP

FAIN# 2301NYPREP

Federal Award Date: December 9, 2022

b. A final financial report (cumulative, covering the entire 3-year project period) is due 90 days following the end of Federal Fiscal Year 3.

PROGRAM REPORTING

The OMB approved Program Report form for this program is Performance Progress Report (PPR). Semi-annual narrative program performance reports must describe the program activities carried out, including an assessment of the effectiveness of those activities in achieving the purposes of this grant. Each report covers the preceding 6-month period and is due 30 days following the end of the 2nd and 4th quarters (i.e., no later than April 30 and October 30, respectively). Electronic online program management report submission through Grantsolutions/OLDC is required.

All recipients and subrecipient(s), including their implementation sites, will be required to collect and report information on program implementation and program outcomes through a common set of performance measures. This requirement applies to any community partners who agree to host a site or recruit program participants (e.g., school districts, non-profits). Recipients must collect and report on these measures approximately twice a year.

Recipients will be expected to check local and state laws, policies, and procedures to ensure that the collection of performance measures data is feasible and obtain any necessary permissions (e.g., formal agreements with partners, Institutional Review Board (IRB) approval, copies of school district approvals) to collect these data. Recipients are responsible for ensuring all subrecipients and implementation sites collect and submit the PREP performance measures. Recipients may develop additional indicators of program performance, as needed, including adding items to the entry or exit surveys. However, all FYSB OMB-approved items must be administered first, in the order presented in the approved survey, before any additional items are added. Any additional survey items should be added at the end of the OMB-approved survey and should not be submitted to ACF.

REAL PROPERTY AND TANGIBLE PERSONAL PROPERTY REPORTING

1. The OMB approved Real Property and Tangible Personal Property Reporting is the following:

- a. Real Property Reports (SF-429s). The SF-429 Real Property forms are not applicable to this program. Purchase, construction, and renovation are not an allowable activity or expenditure under this grant.
- b. Tangible Property Report (SF-428s). The SF-428 Tangible Personal Property forms must be submitted as described in the General Terms and Conditions.

OTHER TERMS AND CONDITIONS

1. Have the project fully functioning and serving youth within at least 90 days following the issuance of the Notice of Award.
2. Formally train facilitators/educators in the evidence-based effective program model or elements of the effective program model by professionals who can provide follow-up technical assistance to facilitators.
3. Provide PREP programming to youth populations that are the most high-risk or vulnerable for pregnancies and sexually transmitted infections, including HIV/AIDS, or have other special circumstances including culturally underrepresented youth populations such as Hispanic, African American, or Native American youth; youth in or aging out of foster care or adjudication systems; youth who are victims of trafficking; youth who have runaway or left home without permission; youth experiencing homelessness; youth who identify as lesbian, gay, bisexual, transgender, and/or questioning (LGBTQ+), and other vulnerable or underserved youth populations.
4. Send at least two key staff persons to the 3-day Adolescent Pregnancy Prevention (APP) Program Grantee Conference held in the Atlanta, Georgia area in 2023, and tentatively in the Anaheim, California, area in 2024. A minimum of two staff persons are to attend at least one of two topical training sessions offered each year of the project in areas such as Washington, DC; Portland, Oregon; and Boston, Massachusetts.
5. Collect and report on all OMB cleared federal PREP performance measures (recipient, partners and sub-recipients). PREP Performance Measures are currently approved under OMB # 0970-0497, expiration date 06/30/2023.
6. For states and sub-recipients conducting local evaluations, participate in training and TA provided by the federal government and follow related guidance provided by ACF/FYSB.
7. Submit curricula and programmatic materials to FYSB, as requested, for a medical accuracy review and provide a plan to comply with making any required modifications.



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2301NYPREP

FAIN# 2301NYPREP

Federal Award Date: December 9, 2022

EFFECTIVE PERIOD

These program-specific Supplemental Terms and Conditions are effective on the date shown in the footer at the bottom of the page and will remain in effect until updated. They will be updated and reissued only as needed whenever a new program-specific statute, regulation or other requirement is enacted or whenever any of the applicable existing Federal statutes, regulations, policies, procedures or restrictions is amended, revised, altered, or repealed.

POINTS OF CONTACT

Points of contact for additional information or questions concerning either the operation of the program or related financial are:

a. Program Office:

Tecia Sellers

Program Specialist

330 C St., SW.

Washington, DC 20201

Tecia.Sellers@acf.hhs.gov

202-401-5733

b. Office Grants Management:

Manolo Salgueiro

Grants Management Officer,

330 C St., SW.

Washington, DC. 20201

Manolo.salgueiro@acf.hhs.gov

202-690-5811

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Exhibit B



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2502NYPREP
FAIN# 2502NYPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

NYS DEPARTMENT OF HEALTH
ESP Corning Tower - Room 1805

ALBANY, NEW YORK 12237

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1146013200R9

5. Data Universal Numbering System (DUNS)

806781340

6. Recipient's Unique Entity Identifier

F863WQVMZSK7

7. Project Director or Principal Investigator

Eric Zasada
Program Director
eric.zasada@health.ny.gov
(518) 474-0535

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee
Grants Management Officer
david.lee@acf.hhs.gov
202-401-5461

10. Program Official Contact Information

Debbie Powell
Deputy Associate Commissioner
ACYF - Family and Youth Services Bureau
debbie.powell@acf.hhs.gov
(202) 205 2360

Federal Award Information

11. Award Number

2502NYPREP

12. Unique Federal Award Identification Number (FAIN)

2502NYPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount
20b. Indirect Cost Amount Administrative Offset
21. Authorized Carryover
22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$1,769,475.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$2,814,290.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee
Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2502NYPREP

FAIN# 2502NYPREP

Federal Award Date: August 6, 2025

Recipient Information

NYS DEPARTMENT OF HEALTH

ESP Corning Tower - Room 1805

ALBANY, NEW YORK 12237

Employer Identification Number (EIN): 1146013200R9

Data Universal Numbering System (DUNS): 806781340

Recipient's Unique Entity Identifier: F863WQVMZSK7

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2025,G99SU25	\$2,814,290.00	\$1,769,475.00	\$2,814,290.00	2502NYPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit C



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, DC 20201 | www.acf.hhs.gov

Tuesday, August 26, 2025

Mr. Jonathan Fanning
New York State Department of Health
Empire State Plaza
Corning Tower Room 859
Albany, NY 12237

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (#2301NYPREP), 2024 (#2401NYPREP), and 2025 (#2502NYPREP).

Dear: Mr. Fanning:

On April 14, 2025, the Administration for Children and Families (ACF) requested that New York provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing New York's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from New York's PREP curricula and program materials:¹

¹ ACF initiated a medical accuracy review to determine if New York's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, New York will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

Be Proud Be Responsible! 5th Edition, Facilitator Manual

- Page 15 (Facilitator Information): “Demonstrate acceptance and respect for all participants, regardless of personal characteristics, including race, cultural background, religion, social class, sexual orientation or gender identity.”
- Page 20 (Teaching Strategies on Roleplaying): “In addition, during the roleplay practice, participants may roleplay sexual pressure situations with someone of a different or the same gender. This may be awkward for straight teens who are sensitive to the suggestion of same-sex romance, for teens who identify as gay or lesbian, or for teens who are transgender or gender nonconforming. It’s important to address this situation directly and proactively.”

Making Proud Choices, 5th Edition, Facilitator Manual

- Page 36 (Module 1, Activity B Procedure): “Facilitator’s Note: Asking participants to tell you their pronouns is a way of creating a safe space for transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns and thus “outing” themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or zir. Pronouns don’t always line up with what observers might expect based on a person’s perceived biological sex. The simple act of requesting pronouns sends the message that transgender and gender nonconforming youth are welcome and respected in the group.”
- Page 39-40 (Module 1, Activity C Procedure): “**Respect diversity:** Let’s keep in mind that there’s diversity in society and in the group. Individuals come from different family backgrounds, different racial and cultural groups and different living situations. Some young people have already had romantic relationships; others aren’t even thinking about it. Some have had sexual intercourse. Some have had sex because they choose to; other’s may have had sex against their will. Some may identify as gay, lesbian, bisexual or straight. Some may identify as male, female or transgender.

Young people may express themselves in ways that don’t conform with their biological sex. There are many ways that youth can express their gender identity. .
..

Define terms related to diversity as needed.

I want to be sure everyone understands some of the terms we use when talking about diversity.

Gender refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel. Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another.

Gender identity is peoples' inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn't fit these labels. It may be the same as (cisgender) or different from (transgender) the sex they were assigned at birth. Gender identity is unique for each person.

Gender expression is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics."

The "purpose" of a PREP grant award is for states to "carry out personal responsibility education programs consistent with this subsection." 42 U.S.C. § 713(b)(1). The statute defines PREP as "a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C)." 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency's authority to administer the program consistent with the authorizing legislation as enacted by Congress. New York's current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: "(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management."

conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs New York to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ New York is directed to remove these and all similar language throughout their curricula and program materials. Should New York fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Nakia Martin-Wright at nakia.martin-wright@acf.hhs.gov.

Exhibit D



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2501NYSRAE
FAIN# 2501NYSRAE
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

NYS DEPARTMENT OF HEALTH
ESP Corning Tower - Room 859

ALBANY, NEW YORK 12237

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1146013200R9

5. Data Universal Numbering System (DUNS)

806781340

6. Recipient's Unique Entity Identifier

F863WQVMZSK7

7. Project Director or Principal Investigator

Eric Zasada

Eric.Zasada@health.ny.gov

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Jerry Milner

Program Authorizing Official

ACYF - Family and Youth Services Bureau

Milner.Jerry@acf.hhs.gov

111-111-1111

Federal Award Information

11. Award Number

2501NYSRAE

12. Unique Federal Award Identification Number (FAIN)

2501NYSRAE

13. Statutory Authority

The Bipartisan Budget Act of 2018, Title V, Section 2954, Public Law 113-93, 42 US Code 710

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.235

16. Assistance Listing Program Title

Sexual Risk Avoidance Education (SRAE)

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2026

\$2,480,128.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$3,656,266.00

*See Remarks

*See Remarks

End Date 09-30-2026

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Footnotes

Grants Management Officer



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501NYSRAE

FAIN# 2501NYSRAE

Federal Award Date: August 6, 2025

Recipient Information

NYS DEPARTMENT OF HEALTH
ESP Corning Tower - Room 859
ALBANY, NEW YORK 12237

Employer Identification Number (EIN): 1146013200R9

Data Universal Numbering System (DUNS): 806781340

Recipient's Unique Entity Identifier: F863WQVMZSK7

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-25-1512	2025,G990597	\$3,656,266.00	\$2,480,128.00	\$3,656,266.00	2501NYSRAE	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Sexual Risk Avoidance Education Program. Funds are subject to the requirements of Section 510 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the SRAE program under which this grant has been awarded, at 42 U.S.C. § 710, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

**DECLARATION OF KRISTINE
CAMPAGNA**

**DECLARATION OF RHODE ISLAND DEPARTMENT OF HEALTH
REPRESENTATIVE**

I, Kristine Campagna, declare as follows:

1. I am a resident of Rhode Island. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I am the Associate Director for Community and Health Equity (“CHE”) Division at the Rhode Island Department of Health (“RIDOH”) and have been held this position since January 2022. I hold a Master’s Degree in Education and have been with RIDOH since 2009. I provide leadership, strategic vision, and policy direction to staff and programs in the Division of CHE. I work directly with the Director of RIDOH and other executive leadership staff to implement RIDOH’s mission to eliminate health disparities and achieve health equity for all Rhode Islanders.

3. The information in the statements set forth below was compiled through personal knowledge, and from RIDOH personnel who have assisted in gathering this information from our agency.

4. I submit this declaration in connection with Plaintiff States’ Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive). I have personal knowledge of the matters set forth below, or with respect to the matters

for which I do not have personal knowledge, I have reviewed information gathered from the Rhode Island Department of Health's ("RIDOH") records by others within the organization.

5. In Rhode Island, our Department of Health supports comprehensive, evidence-based educational programming to reduce pregnancy, HIV and other sexually transmitted infections (STIs), and birth rates for youth at four community-based organizations. Across the State, 150 youth are served by the programs we implement with PREP funding. RIDOH is committed to implementing positive youth development programming that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people's strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths.

Federal Funding Relied on by the Rhode Island Department of Health

6. In Year(s) 2010, 2013 and 2016, Rhode Island submitted a PREP grant application in response to ACF's Funding Opportunity Announcement (FOA). Since that time, Rhode Island has submitted a letter of intent packet to re-authorize PREP grants each year. ACF extends funding to grantees for three-year grant terms. Rhode Island has received these funds since August 2, 2010.

7. ACF has issued to RIDOH three currently active awards covering the period from October 1, 2022, through September 30, 2027. For the period from October 1, 2022 through September 30, 2025, ACF provided \$250,000 in PREP funding to Rhode Island. For the period from October 1, 2023 through September 30, 2026, ACF provided \$250,000 in PREP funding to Rhode Island. For the period from October 1, 2024 through September 30, 2027, ACF provided \$250,000 in PREP funding to Rhode Island. RIDOH is currently operating using fiscal year 2023 funds and has not yet drawn down 2024 or 2025 funds.

8. ACF disburses PREP funding as reimbursements requested by RIDOH. RIDOH expects to request its next grant disbursement on or around September 25, 2025. Reimbursable expenses are accrued throughout the year, and RIDOH is presently awaiting the disbursement of funds from ACF for previously submitted requests.

9. Rhode Island has well-established partnerships with school districts and local organizations to administer these funds. Since [2012], Rhode Island has partnered with Connecting for Children and Families, Progreso Latino, Sojourner House, and Tri-County Community Action Agency to design and implement an evidence-based curriculum that promotes positive youth development and uses science-based approaches to prevent teen pregnancy and support adolescent health and development, including sexual/reproductive health.

Communications from Federal Government

10. On or about April 14, 2025, RIDOH received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that ACF was performing a "medical accuracy review" and requesting submission of "any current curricula and programmatic materials" related to state PREP grants. FYSB stated that the "purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete." That letter is attached as Exhibit 1.

11. As requested, RIDOH submitted all PREP curricula and materials on April 14, 2025. This included PREP curricula and program materials including lesson plan books, facilitation guide, participant surveys, and consent forms.

12. On August 6, 2025, RIDOH received a Notice of Award (NOA) describing the financial information associated with Rhode Island's PREP grant award funds. The NOA states,

“[t]he use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one’s sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.” The NOA is attached as Exhibit 2.

13. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards and award modifications that add funding. The Supplemental T&Cs prohibit grant recipients from including so-called “gender ideology” in PREP-funded programs and services. Per ACF’s notice, these Supplemental T&Cs are effective immediately.

14. Per the August 6, 2025 NOA and the Supplemental T&Cs, the “gender ideology” terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. RIDOH has not used any funds awarded under the August 6, 2025, NOA and thus has not accepted the “gender ideology” term in the NOA or the Supplemental T&Cs.

15. On August 26, 2025, RIDOH received via email another letter from ACF (the PREP Directive) stating that Rhode Island’s “current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified” because Rhode

Island's curriculum and materials include "gender ideology." The identified content, ACF claims, is "outside of the scope of PREP's authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials." ACF further instructs Rhode Island "to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter." ACF asserts that it may take "additional enforcement action," and lists as possibilities "allowing HHS to withhold, disallow, suspend, or terminate Federal awards." That letter is attached as Exhibit 3.

Harms to Rhode Island

16. Rhode Island is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency's ability to plan for the future is severely negatively impacted. The PREP grant covers the salary of three employees at RIDOH. With the uncertainty of the PREP grant's continuation past October 27, 2025, our agency is being forced to contemplate reducing or terminating these valuable employees' positions.

17. Further, the threat to our state's federal financial assistance for failure to remove content concerning "gender ideology" puts at risk \$594,224.200.

18. The impact of a disruption in funds would be devastating to the program. Given my experience, without the continued and uninterrupted funding of PREP grants, RIDOH and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in Rhode Island, especially high-risk youth, will suffer.

19. Loss of funding for this programming would impact RIDOH and community partner capacity to support positive youth development and adolescent life skills development for goal setting, communications, healthy relationships, and social emotional development. It would limit youth leadership opportunities and impair youth access to community service learning that promotes community connectedness. It would harm youth connection to caring adults and safer spaces that support their growth and ability to thrive. As a result, youth in Rhode Island, especially high-risk youth, will be negatively impacted. High risk youth include LGBTQ+ youth who may face increased risks for poor health and safety outcomes. LGBTQ+ youth in general experience higher rates of negative outcomes compared with their straight and cisgender peers, transgender youth face even higher health risks than lesbian, gay, bisexual, and queer youth. Gender identity itself is not a cause of poor mental or physical health outcomes; rather, transgender youths' heightened risks are the result of experiencing rejection, bullying, discrimination, lack of family support, and violence at higher rates than their cisgender peers. Elimination of this programming and revisions to language inclusive of gender identity would contribute harm to LGBTQ+ youth who are already vulnerable and at higher risk of experiencing stigma, discrimination, violence, bullying, and poor health outcomes.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 24, 2025, at Rhode Island, Providence.

A handwritten signature in black ink, reading "Kristine Campagna". The signature is fluid and cursive, with the first name "Kristine" and last name "Campagna" clearly distinguishable.

Kristine Campagna
Associate Director for Community and Health Equity

Exhibit 1



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Lori Zelano
Rhode Island Dept. of Health
3 Capitol Hill, Room 302
Providence, RI, 02908

RE: State Personal Responsibility Education Program 1601RIPREP

Dear Lori Zelano:

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

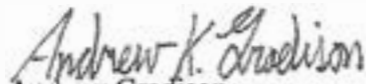
- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual
 - Handouts

- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit 2



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501RIPREP

FAIN# 2501RIPREP

Federal Award Date: August 6, 2025

Recipient Information**1. Recipient Name**

STATE OF RHODE ISLAND DEPARTMENT
OF HEALTH
3 Capitol Hill, Room 302

PROVIDENCE, RHODE ISLAND 02908 5097

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1056000522A5

5. Data Universal Numbering System (DUNS)

929922664

6. Recipient's Unique Entity Identifier

NERYUGQ8XNB1

7. Project Director or Principal Investigator

Patricia Affleck

mira.debarros@health.ri.gov

[NO DATA]

8. Authorized Official

*See Remarks

Federal Agency Information**9. Awarding Agency Contact Information**

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information**11. Award Number**

2501RIPREP

12. Unique Federal Award Identification Number (FAIN)

2501RIPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award**19. Budget Period Start Date** 10-01-2024**20. Total Amount of Federal Funds Obligated by this Action**

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable**25. Total Federal and Non-Federal Approved****26. Project Period Start Date** 10-01-2024 -**27. Total Amount of the Federal Award including Approved Cost Sharing or Matching****Financial Information****End Date** 09-30-2027

\$157,187.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$250,000.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award

Award # 2501RIPREP

FAIN# 2501RIPREP

Federal Award Date: August 6, 2025

Recipient Information

STATE OF RHODE ISLAND DEPARTMENT OF HEALTH

3 Capitol Hill, Room 302

PROVIDENCE, RHODE ISLAND 02908 5097

Employer Identification Number (EIN): 1056000522A5

Data Universal Numbering System (DUNS): 929922664

Recipient's Unique Entity Identifier: NERYUGQ8XNB1

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2025.G99SU25	\$250,000.00	\$157,187.00	\$250,000.00	2501RIPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at: <https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit 3



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, DC 20201 | www.acf.hhs.gov

Tuesday, August 26, 2025

Lori Zelano
Rhode Island Department of Health
3 Capitol Hill, Room 302
Providence, RI 02908

RE: State Personal Responsibility Education Program for Fiscal Years 2023
(#2301RIPREP), 2024 (#2401RIPREP); and 2025 (#2501RIPREP).

Dear Rhode Island Department of Health:

On April 14, 2025, the Administration for Children and Families (ACF) requested that Rhode Island provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing Rhode Island's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from Rhode Island's PREP curricula and program materials:¹

¹ ACF initiated a medical accuracy review to determine if Rhode Island's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, Rhode Island will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

Teen Outreach Program (TOP), 2nd Edition

- LAM-SU-A2, “Defining Sexuality,” page 80: “Facilitator Tip: Sexuality is complex and can be difficult to define. It is normal for participants to struggle to understand it broadly and to have differing views. Support participants in sharing and listening to one another, and make sure dialogue remains respectful and inclusive.

Circle ‘Sex’ in ‘Sexuality.’

Ask

- How much of our Word Web is about ‘having sex’ or ‘sex’ as physical behavior?

Share

- Sexuality is more than physical behavior

Ask

- Besides physical behavior, what else do you think could be part of a person’s sexuality?

If participants do not identify in the following, add

- Sexual and reproductive anatomy
- Body Image
- Biological sex
- Gender Including gender identity, gender expression and gender roles
- Sexual orientation
- Desires, pleasure, intimacy and reproduction
- Beliefs, attitudes and values about sexuality”

- LAM-SI-F1, “This Is Me. Who Are You? page 94: “Ask
 - What comes to mind when you hear me say ‘identity’?
 - What might be part of someone’s identity?

If participants do not identify the following, add

- Our identity, or how we see ourselves, includes many different things, such as our race/ethnicity, nationality, culture, religious affiliation, age, gender, sexuality, roles (Ex: athlete, big sister, etc.), personality traits and interests.

Share

- We all have our own unique identity.
- Today in TOP Club, we will explore our own identity and learn about others’ identities.

- Identity is personal and can be sensitive. Anytime we share personal information with each other, we need to pay extra attention to our group guidelines.
 - We are all part of keeping TOP a safe space.
 - It's important to be patient, kind and supportive.
 - Remember that it is not okay to put other people on the spot or identify other people by name and share their personal experiences.”
- LAM-HW-F1, Facilitator Resource, “Frequently Asked Questions,” page 148:

“Why would someone with a penis not identify as a boy/man?
 Why would someone with a vulva not identify as a girl/woman? When we use body parts to describe people, we’re talking about ‘biological sex,’ or sex assigned at birth, which is different than gender. Gender is how people identify and express themselves. Transgender people are people whose gender identity is different from their biological sex or sex assigned at birth. Gender non-conforming and non-binary people are people whose gender identities are not exclusively either boy/man or girl/woman. However someone identifies, they should feel safe, respected and included in TOP.”
 - Pages 142, 156, 179, 187, 195, 202, 232, 254, 264, 271, 275, 280, 286, 319, and 344 (repeated admonition to use “inclusive” language in almost every lesson):

“Use inclusive language. Even if you have known all your participants a long time, do not make assumptions about their sexuality and who they are interested in dating. LGBTQ youth can quickly feel isolated if all relationship examples and language are only heterosexual. Use the term ‘partner’ to refer to a romantic partner.”
 - LAM-HW-F6, “Abstinence and Expressing Affection,” pages 195-98:

“Circle the word ‘sex’ with ‘sexuality’ on the board/chart paper.
 Share

 - When people think of sexuality, often just think of sex.
 - However, sex is only one part of sexuality.
 - Sexuality also includes our bodies and how we feel about them, our desires and attractions to others, our relationships, our beliefs and values about sexuality, how we show love and affection and how we identify and express our gender.
 - While some people choose to express their sexuality through sex, others choose to practice abstinence.”

The “purpose” of a PREP grant award is for states to “carry out personal responsibility education programs consistent with this subsection.” 42 U.S.C. § 713(b)(1). The statute defines PREP as “a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted

infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C).” 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency’s authority to administer the program consistent with the authorizing legislation as enacted by Congress. Rhode Island’s current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs Rhode Island to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ Rhode Island is directed to remove these and all similar language throughout their curricula and program materials. Should Rhode Island fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371

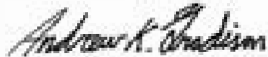
² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: “(i) Healthy relationships, including marriage and family interactions; (ii) Adolescent development, such as the development of healthy attitudes and values about adolescent growth and development, body image, racial and ethnic diversity, and other related subjects; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.”

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Arlisa Britt, arlisa.britt@acf.hhs.gov.

(allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,

A handwritten signature in dark ink, appearing to read "Andrew K. Gradison". The signature is fluid and cursive, with the first name "Andrew" and last name "Gradison" clearly distinguishable.

Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF
OREGON; STATE OF MINNESOTA; STATE
OF COLORADO; STATE OF
CONNECTICUT; STATE OF DELAWARE;
DISTRICT OF COLUMBIA; STATE OF
HAWAI'I; STATE OF ILLINOIS; STATE OF
MAINE; STATE OF MARYLAND;
COMMONWEALTH OF MASSACHUSETTS;
STATE OF MICHIGAN; STATE OF NEW
JERSEY; STATE OF NEW YORK; STATE
OF RHODE ISLAND; STATE OF
WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF
HEALTH AND HUMAN SERVICES;
ROBERT F. KENNEDY, JR., in his official
capacity as Secretary of U.S. Department of
Health and Human Services; UNITED STATES
HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND
FAMILIES; and ANDREW GRADISON, in his
official capacity as Acting Assistant Secretary
of U.S. Health and Human Services
Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

**DECLARATION OF MOLLY
HERRMANN**

DECLARATION OF WISCONSIN DEPARTMENT OF PUBLIC INSTRUCTION

I, Molly Herrmann, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of Wisconsin. I am over the age of 18, competent to testify to the matters herein, and make this declaration based on my personal knowledge.

2. I am an Education Consultant at the Wisconsin Department of Public Instruction. One half of my salary is currently funded by Wisconsin's Personal Responsibility Program (PREP) grant.

3. I partner with the Wisconsin Department of Health Services to support the grant goals of the Personal Responsibility Education Program (PREP) grant via a position at the Wisconsin Department of Public Instruction.

4. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state Personal Responsibility Education Program (PREP) grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the "PREP Directive"). I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from Wisconsin Department of Public Instruction's records by others within the organization.

5. The Department of Public Instruction is the state agency that advances public education and libraries in Wisconsin. Our mission is to advance equitable, transformative, and sustainable educational experiences that develop learners, schools, libraries, and communities in Wisconsin.

6. The Wisconsin Department of Health Services is a PREP grantee. The Department of Public Instruction contracts with the Wisconsin Department of Health Services and receives PREP funding through this contract. This partnership expands the reach of PREP by creating a partnership between the state's health and education departments.

7. As part of its work, the Wisconsin Department of Public Instruction operates in one state to administer comprehensive, evidence-based educational programming to reduce pregnancy, HIV, sexually transmitted infections (STIs), and birth rates for youth. This work is funded in part by PREP. In Wisconsin, the Wisconsin Department of Public Instruction

- Serves as content expert and as a resource to local education professionals, youth serving organizations, and state level partners with technical assistance around Human Growth and Development statute interpretation (Wis. Stat. § 118.019), policy development, implementation, and related topics, including education for youth with disabilities and LGBTQIA+ youth.
- Develops supplemental materials that promote appropriate adaptations and recommendations to implement the My Sexual Health My Future curriculum with youth with disabilities.
 - Promotes participation of principals and health educators in completing School Health Profiles.
 - Collaborates with DPI Youth Risk Behavior Survey (YRBS) and School Health Profiles teams to disseminate and communicate findings to gain clarity on how the Human Growth and Development statute is being practiced throughout the state of Wisconsin and develop strategies for improvements.
 - Develops best practices trainings and resources based on current YRBS data, Wisconsin Information System for Education Data Dashboard (WISEdash) data, and other available datasets.
 - Engages local communities, including caregivers and students, in pairing data with action steps and personal stories.
 - Updates DPI's Human Growth & Development Resource Guide according to agreed-upon standards for inclusion, medical accuracy, and navigability.

The Wisconsin Department of Public Instruction develops resources available to all 421 school districts across the state of Wisconsin. In Year 2 of funding (October 1,

2024 – September 30, 2025), the Wisconsin Department of Public Instruction received \$80,000 in PREP funding to provide these services in Wisconsin.

8. The Wisconsin Department of Public Instruction’s programming is evidence-based, medically accurate, and age appropriate. The Wisconsin Department of Public Instruction’s programming addresses both abstinence and the use of contraception, as well as at least three of six “adulthood preparation subjects” as described in 42 U.S.C. § 713(b)(2)(C). It is provided in the cultural context most appropriate for individuals in the particular population group to which the programming is directed and is targeted towards high-risk youth. Additionally, the Wisconsin Department of Public Instruction’s programs use positive youth development principles when offering trauma-informed prevention programming.

Effectiveness of Programs

9. As part of its work administering state education programming, the Wisconsin Department of Public Instruction measures outcomes by developing materials that ensure compliance with Wis. Stat. § 118.019, which governs instruction regarding human growth and development. Every six months, the Wisconsin Department of Public Instruction reports progress on the deliverables in ¶ 7, *supra*, to the Wisconsin Department of Health Services.

10. All targets for each deliverable in the period of October 1, 2024, to March 31, 2025, were met and reported to the Wisconsin Department of Health Services.

Communications from Federal Government

11. The Wisconsin Department of Public Instruction is aware that on or about April 14, 2025, the Wisconsin Department of Health Services received a letter from ACF’s Family and

Youth Services Bureau (FYSB)’s Division of Positive Youth Development indicating that ACF was performing a “medical accuracy review” and requesting submission of “any current curricula and programmatic materials” related to state PREP grants. FYSB stated that the “purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete.”

12. The Wisconsin Department of Public Instruction is also aware that on August 6, 2025, the Wisconsin Department of Health Services received a notice of Award (NOA) describing the financial information associated with Wisconsin’s PREP grant award funds. The NOA states, “The use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one’s sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.”

13. The Wisconsin Department of Public Instruction is also aware that on August 7, 2025, ACF published supplemental terms and conditions (the “Supplemental T&Cs”) that purport to apply to awards and award modifications that add funding. The Supplemental T&Cs prohibit

grant recipients from including so-called “gender ideology” in PREP-funded programs and services. Per ACF’s notice, these Supplemental T&Cs are effective immediately.

14. The Wisconsin Department of Public Instruction is also aware that on August 26, 2025, the Wisconsin Department of Health Services received the PREP Directive from ACF, stating that Wisconsin’s “current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified” because Wisconsin’s curriculum and materials include “gender ideology.” The identified content, according to the PREP Directive, is “outside of the scope of PREP’s authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials.” The Prep Directive further instructs Wisconsin **“to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.”** The Prep Directive asserts that ACF may take “additional enforcement action,” and listed as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.”

Harms to the Wisconsin Department of Public Instruction

15. The Wisconsin Department of Public Instruction is currently experiencing and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and the PREP Directive have created immense confusion and negatively impacted our organization’s ability to plan for the future.

16. The federal government’s threat to Wisconsin to restrict federal financial assistance if content concerning “gender ideology” is not removed puts at risk \$80,000 annually for the remainder of the 5-year grant. This would have a catastrophic effect on the Wisconsin Department of Public Instruction’s work.

17. For example, our PREP grant covers the salary of .5 FTE at the Wisconsin Department of Public Instruction. With the uncertainty of the PREP grant's continuation past October 27, 2025, our organization is being forced to contemplate reducing or terminating this valuable position.

18. The absence of this funding leaves Wisconsin School districts without a specifically funded position to ensure Human Growth and Development statute compliance. This grant funds technical assistance to the Wisconsin Center for the Blind and Visually Impaired and the Wisconsin School for the Deaf to ensure medically accurate, age-appropriate, and statute compliant HGD is provided to their students.

19. The Wisconsin Department of Public Instruction must follow the laws of Wisconsin. To comply with the NOA, Supplemental T&Cs, and the PREP Directive, the Wisconsin Department of Public Instruction would be forced to violate Wisconsin's comprehensive sexual health education laws, including Wis. Stat. § 118.019. If Human Growth and Development instruction is provided, the statute recommends that instructors "Present information about avoiding stereotyping and bullying, including how to refrain from making inappropriate remarks, avoiding engaging in inappropriate physical or sexual behaviors, and how to recognize, rebuff, and report any unwanted or inappropriate remarks or physical or sexual behaviors." Wis. Stat. § 118.019(2)(f). The statute also states that instruction must not discriminate:

Nondiscrimination. An instructional program under this section shall use instructional methods and materials that, consistent with s. 118.13 (1), do not discriminate against a pupil based upon the pupil's race, gender, religion, sexual orientation, or ethnic or cultural background or against sexually active pupils or children with disabilities."

Wis. Stat. § 118.019(2d).

Harms to Youth Who are at Particular Risk of Becoming Pregnant or Contracting HIV and Other STIs

20. If the Wisconsin Department of Public Instruction loses PREP funding, the Wisconsin Department of Public Instruction would be unable to meet its obligations to provide age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. Youth in Wisconsin, especially high-risk youth, will suffer.

21. Specific harms to transgender youth as a result of erasure and rejection are documented in national, state, and local data. According to the Family Acceptance Project, youth who experience high rejection from caregivers are at three times the risk for contracting HIV or a sexually transmitted infection (STI).¹ Transgender and LGBTQ+ youth are over-represented in the foster care system. A 2019 study found that 30.4 percent of youth in foster care identify as LGBTQ+ and five percent as transgender, compared to 11.2 percent and 1.17 percent of youth not in foster care.² Forty-four percent (44%) of transgender and nonbinary youth in Wisconsin seriously considered suicide in the past year, according to the Trevor Project's Wisconsin report.³ When requested pronouns are not used for transgender youth, they are twice as likely to consider suicide, according to the 2020 Trevor Project Mental Health Report.⁴

22. Inclusive Human Growth and Development programming is an opportunity to “advance equitable, transformative, and sustainable educational experiences that develop learners,

¹ Caitlin Ryan. Family Acceptance Project Resources.

www.familyproject.sfsu.edu/sites/default/files/documents/FAP-Resource-Booklet.pdf.

² Children's Rights. LGBTQ+ Youth in Foster Care- January 2023 Fact Sheet. www.childrensrights.org/wp-content/uploads/2023/01/CR-LGBTQ-Youth-in-Foster-Care-2023-Fact-Sheet.pdf.

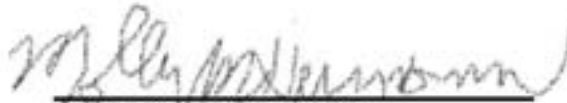
³ The Trevor Project. 2023 US National Survey on the Mental Health of LGBTQ+ Young People. www.thetrevorproject.org/survey-2023.

⁴ The Trevor Project. Facts About Suicide Among LGBTQ+ Young People. www.thetrevorproject.org/resources/article/facts-about-lgbtq-youth-suicide.

schools, libraries, and communities in Wisconsin,” consistent with the Wisconsin Department of Public Instruction’s mission.⁵ Such programming also meets statutory obligations to provide age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. 42 U.S.C. §§ 713(b)(2)(B)(ii), (v), (vi). Inclusive Human Growth and Development programming also provides the opportunity for much needed content and skill development in at least three of six “adulthood preparation subjects” to youth ages 10-19. 42 U.S.C. § 713(b)(2)(C).

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 22, 2025, at Wisconsin, Madison.



MOLLY HERRMANN
Education Consultant
Wisconsin Department of Public Instruction

⁵ Wisconsin Department of Public Instruction. Our Vision, Mission and Values. www.dpi.wi.gov/strategic-plan/vision-mission.

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON**

STATE OF WASHINGTON; STATE OF OREGON; STATE OF MINNESOTA; STATE OF COLORADO; STATE OF CONNECTICUT; STATE OF DELAWARE; DISTRICT OF COLUMBIA; STATE OF HAWAI'I; STATE OF ILLINOIS; STATE OF MAINE; STATE OF MARYLAND; COMMONWEALTH OF MASSACHUSETTS; STATE OF MICHIGAN; STATE OF NEW JERSEY; STATE OF NEW YORK; STATE OF RHODE ISLAND; STATE OF WISCONSIN,

Plaintiffs,

v.

UNITED STATES DEPARTMENT OF HEALTH AND HUMAN SERVICES; ROBERT F. KENNEDY, JR., in his official capacity as Secretary of U.S. Department of Health and Human Services; UNITED STATES HEALTH AND HUMAN SERVICES ADMINISTRATION FOR CHILDREN AND FAMILIES; and ANDREW GRADISON, in his official capacity as Acting Assistant Secretary of U.S. Health and Human Services Administration for Children and Families,

Defendants.

Case No. 6:25-cv-01748-AA

DECLARATION OF PAULA TRAN

DECLARATION OF PAULA TRAN

I, Paula Tran, pursuant to 28 U.S.C. § 1746, declare as follows:

1. I am a resident of Wisconsin. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I currently serve as the State Health Officer for the State of Wisconsin and the Administrator of the Division of Public Health (DPH) for the Wisconsin Department of Health Services (WI-DHS). In my role, I oversee the programs that administer Personal Responsibility Education Program (PREP) grants for Wisconsin.

3. I submit this declaration in connection with Plaintiff States' Motion for Preliminary Injunction and Complaint for Injunctive and Declaratory Relief pertaining to the August 6, 2025 Notice of Award (NOA) from the United States Department of Health and Human Services (HHS) Administration for Children and Families (ACF) regarding state PREP grants; the August 7, 2025 PREP Supplemental Terms and Conditions (Supplemental T&Cs), and the August 26, 2025 directive letter from ACF to grantees (the PREP Directive). I have personal knowledge of the matters set forth below, or with respect to the matters for which I do not have personal knowledge, I have reviewed information gathered from WI-DHS's records by others within the organization.

4. In Wisconsin, with PREP funding, WI-DHS supports comprehensive, evidence-based educational programming to reduce unintended pregnancy and HIV and other sexually transmitted infections (STIs), for youth at ten high schools, three residential care facilities, and two community sites, in partnership with four sub-awardees, who are each community-based

organizations. Across Wisconsin, approximately 950-1000 youth are served annually by the programs we implement with PREP funding.

5. The vision at WI-DHS is, “Everyone living their best life,” and the mission is, “Protect and promote the health and safety of the people of Wisconsin.” The work funded by the PREP grant, in following the key requirements as outlined in the Grant Administration Guidance, most recently provided by FYSB in ACF in January 2025, upholds this mission and vision statement. Requirements for the grant include (among others): the implementation of evidence-based or evidence-informed programs; maintaining the fidelity of these programs; inclusion of three of six possible adult preparation subjects (Wisconsin’s program covers healthy relationships, adolescent development, and healthy life skills); ensuring that programming is medically accurate, age and culturally appropriate; delivering programming within a positive youth development framework and with a trauma-informed approach. The Wisconsin PREP program meets these requirements, and in doing so is in alignment with the WI-DHS vision and mission, as we are contributing to the protection and promotion of the health and safety of youth across Wisconsin. These programs and the partners funded by this grant contribute to the capacity to serve youth in Wisconsin in ways that ensure all youth have the knowledge and information they need to be healthy teens and grow into healthy adults.

6. Positive Youth Development is a strengths-based approach and focuses on enhancing positive qualities that adolescents possess. This approach has positive effects across physical and mental health outcomes for youth.

7. In applying for PREP grants, WI-DHS has complied with the program’s application requirements, which include assurances that programming is evidence-based, medically accurate, age appropriate, provided in the cultural context most appropriate for

individuals in the particular population group to which the programming is directed, and targeted towards high-risk youth. The programming addresses both abstinence and the use of contraception, as well as at least three of six “adulthood preparation subjects” as described in 42 U.S.C. § 713(b)(2)(C). In its grant applications, WI-DHS also addresses how Wisconsin uses positive youth development principles when offering trauma-informed prevention programming.

Federal Funding Relied on by WI-DHS

8. Wisconsin has submitted a PREP grant application in response to every ACF Funding Opportunity Announcement (FOA) since the grant’s inception in 2010. Since that time, Wisconsin has submitted a letter of intent packet to re-authorize PREP grants each year. ACF extends funding to grantees for three-year grant terms. Wisconsin applies for a new grant each year, resulting in overlapping awards. Wisconsin has received these funds since 2010.

9. ACF has issued to WI-DHS three currently active awards covering the period from October 1, 2022, through September 30, 2027. For the period from October 1, 2022 through September 30, 2025 ACF provided \$864,513 in PREP funding to Wisconsin. For the period from October 1, 2023 through September 30, 2026, ACF provided \$922,157 in PREP funding to Wisconsin. For the period from October 1, 2024 through September 30, 2027, ACF provided \$888,596 in PREP funding to Wisconsin. During the 2024-2025 project year, WI-DHS operated using fiscal year 2023 funds, while drawing down approximately \$144,000 from fiscal year 2024 funds.

10. ACF disburses PREP funding as reimbursements requested by WI-DHS. Reimbursable expenses are accrued throughout the year, and WI-DHS is presently awaiting the disbursement of funds from ACF for previously submitted requests.

11. Wisconsin has well-established partnerships with school districts and local organizations to administer these funds. Since 2010, Wisconsin has partnered with many organizations in various urban and rural communities across the state to design and implement training programs to provide teachers and educators with the tools and information necessary to teach science-based sexual health education and personal responsibility to high-risk students in local school districts and community-based organizations. Partner organizations have changed over time. WI-DHS's most recent funding cycle began in October 2024 and the following organizations were awarded funding for direct program implementation with youth through September 2027: Community Action, Inc., Newcap Inc., Lad Lake, Children's Wisconsin Black River Falls, and Healthfirst.

Communications from Federal Government

12. On or about April 14, 2025, WI-DHS received via email a letter from ACF's Family and Youth Services Bureau (FYSB)'s Division of Positive Youth Development indicating that ACF was performing a "medical accuracy review" and requesting submission of "any current curricula and programmatic materials" related to state PREP grants. FYSB stated that the "purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete." That letter is attached as Exhibit A.

13. As requested, WI-DHS submitted all PREP curricula and materials on April 22, 2025. This included copies of curricula, supplemental lessons used by some of our implementation sites, and the template consent form used by implementation sites.

14. On August 6, 2025, WI-DHS received a Notice of Award (NOA) describing the financial information associated with Wisconsin's PREP grant award funds. The NOA states,

“The use of Federal funds from this award constitutes the grantee’s acceptance of the listed terms and conditions.” In the Remarks section, the NOA states, “Recipients are prohibited from including gender ideology in any program or service that is funded with this award.” The Terms and Conditions section states, in part, “[t]he statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one’s sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.” The NOA is attached as Exhibit B.

15. On August 7, 2025, ACF published Supplemental T&Cs applicable to PREP awards and award modifications that add funding. The Supplemental T&Cs prohibit grant recipients from including so-called “gender ideology” in PREP-funded programs and services. Per ACF’s notice, these Supplemental T&Cs are effective immediately.

16. Per the August 6, 2025, NOA and the Supplemental T&Cs, the “gender ideology” terms and conditions of the NOA and Supplemental T&Cs are not accepted until the grantee uses federal funds to which the terms and conditions apply. WI-DHS has not used any funds awarded under the August 6, 2025, NOA and thus has not accepted the “gender ideology” term in the NOA or the Supplemental T&Cs.

17. On August 26, 2025, WI-DHS received via email another letter from ACF, the PREP Directive, stating that Wisconsin’s “current PREP curricula and program materials are out

of compliance with the PREP statute and HHS regulations and must be modified” because Wisconsin’s curriculum and materials include “gender ideology.” The identified content, according to the PREP Directive, is “outside of the scope of PREP’s authorizing statute...and all references to it must be removed from [the] PREP curricula and program materials.” The PREP Directive further instructs Wisconsin **“to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter.”** The PREP Directive asserts that ACF may take “additional enforcement action,” and lists as possibilities “allowing HHS to withhold, disallow, suspend, or terminate Federal awards.” That letter is attached as Exhibit C.

Harms to Wisconsin

18. Wisconsin is currently and will continue to experience harm as a result of the NOA, the Supplemental T&Cs, and the PREP Directive. The NOA, Supplemental T&Cs, and PREP Directive have created immense confusion for our agency and partners. Our agency’s ability to plan for the future is severely negatively impacted.

19. If WI-DHS declines the PREP funding in light of the PREP directive, WI-DHS would face several types of harms. For example, our PREP grant covers the salary of two positions at WI-DHS. With the uncertainty of the PREP grant’s continuation past October 27, 2025, WI-DHS is being forced to contemplate reducing or eliminating these valuable positions. This funding also covers in part or in full the salaries of seven facilitators at WI-DHS’ sub-awardee agencies, as well as parts of the salaries for five program managers across these sites. The PREP grant also contributes substantially to the salary of two employees at UW-Madison, with whom WI-DHS contracts for required evaluation services for the grant, as well as parts of

the salaries of three other individuals who are valuable parts of the Program Support Team, providing important quality improvement work for our programming.

20. The impact of a disruption in funds would be devastating to the program. Given my experience, without the continued and uninterrupted funding of PREP grants, WI-DHS and its partners will not be as effective in administering and providing age-appropriate and medically accurate education to youth who are at particular risk of becoming pregnant or contracting HIV and other STIs. As a result, youth in Wisconsin, especially high-risk youth, will suffer.

21. Additional harms associated with loss of this funding include the loss of crucial sexual health education for about 1,000 Wisconsin youth annually. In addition to important knowledge necessary for taking personal responsibility for reducing risk of unintended pregnancy and sexually transmitted infections, this programming provides youth with knowledge and support for the development of healthy relationships, for navigating safely online, and for learning how to access and navigate the healthcare system.

22. For most or all the sites served by PREP funding, the loss of funding would result in youth not receiving this education. WI-DHS sub-awardees are providing programming in places that are not otherwise providing comprehensive sexual health education to the youth in their schools or facilities. It is likely that this gap would not be filled in the absence of PREP funding, leaving thousands of youth in Wisconsin without crucial information that is necessary for taking personal responsibility for their health and relationships, and reducing their risk for unintended pregnancy and sexually transmitted infections.

23. Alternatively, accepting the funding, but removing this medically accurate information, per the PREP Directive, would also create significant harms. For youth who identify as non-binary and transgender, the loss of this education could contribute to increased

risk for negative mental health and well-being outcomes, including rates of suicide, suicide attempts, anxiety and depression. Transgender and non-binary youth have disproportionately high rates of these negative outcomes. Support and belonging are protective factors for reducing risk for anxiety, depression, and suicide. The Trevor Project survey reports that LGBTQ+ youth say that people in their lives can best show support and acceptance for them by: trusting they know who they are (88%), and respecting their pronouns (63%). These responses highlight the importance of providing clear definitions to validate youths' experiences within these evidence-based curricula.

24. Additionally, 45% of nonbinary or transgender youth in Wisconsin say they or their family has considered leaving Wisconsin for another state because of LGBTQ+-related politics and laws. It would be a loss for Wisconsin for families to feel a policy that did not acknowledge gender identity in youth-focused programming contributed to an anti-trans culture in our state that precipitated moving out of Wisconsin.

25. All youth are harmed when the omission of defining gender leads to confusion, misinformation, fear, bullying, and violence when youth have a lack of understanding about and empathy for themselves and their peers.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Executed on September 22, 2025, at Wisconsin, Madison.



PAULA TRAN
WISCONSIN STATE HEALTH OFFICER

Exhibit A



ADMINISTRATION FOR
CHILDREN & FAMILIES

Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, D.C. 20201 | www.acf.hhs.gov

April 14, 2025

Wisconsin Dept. of Health Services
1 West Wilson Street
P.O. Box 7850
Madison, WI, 53707

RE: State Personal Responsibility Education Program 1601WIPREP

Dear :

The Administration for Children and Families (ACF), Family and Youth Services Bureau (FYSB), Division of Positive Youth Development's State Personal Responsibility Education Program (PREP) grant recipients and subrecipients are required to comply with all statutory requirements of PREP including ensuring the programs are "medically accurate and complete" and the program provides "age-appropriate" information and activities. 42 U.S.C. § 713(b)(2)(B); *see also* 45 CFR § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award); and 45 CFR § 75.364(a) (requiring grantees to provide HHS with access to any records pertinent to the Federal award).

In accordance with the terms and conditions of your State Personal Responsibility Education Program grants, you may be requested to submit curricula and programmatic materials to FYSB, for a medical accuracy review, as specified in the *Terms and Conditions, Other Terms and Conditions Section under Program Reporting and Requirements*.

This letter is to request that you submit for a medical accuracy review any current curricula and programmatic materials in use or in any way relevant to your State PREP grant. This includes both the curricula and programmatic materials you are currently implementing as well as any curricula and programmatic materials you have approved for use by subrecipients or subcontractors in your state's PREP program. Please submit these curricula and materials within three (3) business days, and no later than April 17, 2025 by 11:59 PM ET.

Instructions for submitting these curricula and materials are as follows:

- Provide electronic copies of all curricula materials and supplemental information that will be provided to facilitators and program participants, including, but not limited to:
 - Teacher Manual
 - Student Manual
 - Handouts

- Video Links
- DVDs
- Brochures
- PowerPoints
- Text Messages
- Video Game Content
- Consent/Assent Forms

The purpose for the medical accuracy review of program materials is to ensure the information being shared with program participants is medically accurate and complete. A Guidance Document on the medical accuracy review process is attached to this email. Be sure to complete the attached Grantee Submission Form to identify all program materials that will be uploaded to Dropbox. It is very important this form be submitted along with your curricula. We ask that all supplemental materials be listed at the bottom of the form, separate from the curricula files.

Please email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison

Acting Assistant Secretary
Administration for Children and Families

Enclosures:

Medical Accuracy Review Guidance Document
Grantee Submission Form

Exhibit B



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2502WIPREP
FAIN# 2502WIPREP
Federal Award Date: August 6, 2025

Recipient Information

1. Recipient Name

STATE OF WISCONSIN DEPARTMENT OF
HEALTH SERVICES
1 W. WILSON ST RM 250

MADISON, WISCONSIN 53703 3445

2. Congressional District of Recipient

*See Remarks

3. Payment Account Number and Type

*See Remarks

4. Employer Identification Number (EIN)

1396006469B1

5. Data Universal Numbering System (DUNS)

036448835

6. Recipient's Unique Entity Identifier

CG2SZ7HCNV54

7. Project Director or Principal Investigator

Kara Benjamin

kara.benjamin@dhs.wisconsin.gov

(608) 266-9622

8. Authorized Official

*See Remarks

Federal Agency Information

9. Awarding Agency Contact Information

David Lee

Grants Management Officer

david.lee@acf.hhs.gov

202-401-5461

10. Program Official Contact Information

Debbie Powell

Deputy Associate Commissioner

ACYF - Family and Youth Services Bureau

debbie.powell@acf.hhs.gov

(202) 205 2360

Federal Award Information

11. Award Number

2502WIPREP

12. Unique Federal Award Identification Number (FAIN)

2502WIPREP

13. Statutory Authority

Section 513 of the Social Security Act

14. Federal Award Project Title

*See Remarks

15. Assistance Listing Number

93.092

16. Assistance Listing Program Title

Personal Responsibility Education Program

17. Award Action Type

Supplement

18. Is the Award R&D?

*See Remarks

Summary Federal Award

19. Budget Period Start Date 10-01-2024

20. Total Amount of Federal Funds Obligated by this Action

20a. Direct Cost Amount

20b. Indirect Cost Amount Administrative Offset

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period

24. Total Approved Cost Sharing or Matching, where applicable

25. Total Federal and Non-Federal Approved

26. Project Period Start Date 10-01-2024 -

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching

Financial Information

End Date 09-30-2027

\$558,701.00

*See Remarks

*See Remarks

*See Remarks

*See Remarks

\$888,596.00

*See Remarks

*See Remarks

End Date 09-30-2027

*See Remarks

28. Authorized Treatment of Program Income

*See Remarks

29. Grants Management Officer – Signature

David Lee

Grants Management Officer

Footnotes



Department of Health and Human Services
Administration for Children and Families

Notice of Award
Award # 2502WIPREP
FAIN# 2502WIPREP
Federal Award Date: August 6, 2025

Recipient Information

STATE OF WISCONSIN DEPARTMENT OF HEALTH SERVICES
1 W. WILSON ST RM 250
MADISON, WISCONSIN 53703 3445

Employer Identification Number (EIN): 1396006469B1

Data Universal Numbering System (DUNS): 036448835

Recipient's Unique Entity Identifier: CG2SZ7HCNV54

Object Class: 41.15

Financial Information

<u>Appropriation</u>	<u>CAN</u>	<u>Allotment</u>	<u>Award this action</u>	<u>Cumulative Grant</u>	<u>Document Number</u>	<u>Funding Type</u>
				<u>Award to Date</u>		
75-X-1512	2025,G99SU25	\$888,596.00	\$558,701.00	\$888,596.00	2502WIPREP	Formula

Terms and Conditions

This grant award represents an obligation for the ACF Family and Youth Services Bureau State Personal Responsibility Education Program. Funds are subject to the requirements of Section 513 of Social Security Act.

This award is subject to the requirements listed in the terms and conditions. The use of Federal funds from this award constitutes the grantee's acceptance of the listed terms and conditions. The electronic copy of Terms and Conditions to support this program can be found on the website at:

<https://acf.gov/grants/manage-grant/grant-award/award-terms>.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. The statutory authority for the PREP program under which this grant has been awarded, at 42 U.S.C. § 713, does not authorize teaching students that gender identity is distinct from biological sex or boys can identify as girls and vice versa, or that there is a vast spectrum of genders that are disconnected from one's sex. Therefore, gender ideology is outside of the scope of the statutory authority for this award. In addition, any costs associated with gender ideology are not allowable expenditures of federal grant funds or maintenance-of-effort funds for this grant because they are not necessary, reasonable, or allocable for the performance of this award. See 45 C.F.R. §§ 75.403-405.

Remarks

* This field is intended to be included in the standardized Notice of Award and will be displayed in subsequent quarters.

Recipients are prohibited from including gender ideology in any program or service that is funded with this award. Please refer to Additional Term and Condition section of the Supplemental Terms and Conditions for more information on this requirement.

Exhibit C



ADMINISTRATION FOR
CHILDREN & FAMILIES
Office of the Assistant Secretary | 330 C Street, S.W., Suite 4034
Washington, DC 20201 | www.acf.hhs.gov

Tuesday, August 26, 2025

Ms. Kara Benjamin
Wisconsin Department of Health
1 West Wilson Street, Room 250
Madison, WI 53707

RE: State Personal Responsibility Education Program grants for Fiscal Years 2023 (#2301WIPREP), 2024 (#2401WIPREP), and 2025 (#2501WIPREP).

Dear Ms. Benjamin:

On April 14, 2025, the Administration for Children and Families (ACF) requested that Wisconsin provide current curricula and programmatic materials in use or in any way relevant to your state Personal Responsibility Education Program (PREP) grant for a medical accuracy review in accordance with the Terms and Conditions of the grant. We appreciate your timely response to ACF's request.

While preparing Wisconsin's PREP content for the medical accuracy review, ACF identified content in the curricula and other program materials that fall outside of the scope of PREP's authorizing statute at 42 U.S.C. § 713. Specifically, the following subjects and language are outside the scope of the authorizing statute and all references to it must be removed from Wisconsin's PREP curricula and program materials:¹

High School FLASH, Third Edition, Educator Manual

- Page 4: Lesson 4, "Sexual Orientation and Gender Identity"
 1. Let's start with **assigned sex**.

¹ ACF initiated a medical accuracy review to determine if Wisconsin's approach to biological sex in its PREP curricula is medically accurate and in compliance with the program statute and the terms and conditions of the award. In preparing the materials that we received, we saw that the curricula include gender ideology which is not authorized by the statute. As per this letter, Wisconsin will need to remove this content from its PREP curricula and program materials. In light of this, we are changing our planned course of action and are no longer conducting a review for medical accuracy because the content that we were going to review for medical accuracy is outside of the subjects that are statutorily authorized in this program.

- When a baby is born, the doctor usually says the baby is male or female, depending on the appearance of the baby's genitals. This is the baby's assigned sex.
- The assigned sex of babies with a vagina, clitoris, and XX chromosomes is usually female.
- The assigned sex of babies with a penis, scrotum, and XY chromosomes is usually male.
- Some babies are born with variations in their genitals, reproductive organs, or chromosomes. This is called intersex. The doctor will usually assign a sex of male or female, although people may identify differently as they get older.

If someone asked you to summarize assigned sex, what would you say? Who is it assigned by? Right, it's when the doctor says, 'It's a boy' or 'It's a girl,' depending on the baby's genitals. Good job. Any questions.

2. Let's move on to gender identity. While assigned sex is based on the body parts the doctor sees at birth, gender identity has nothing to do with body parts.

- Gender identity is a deep feeling people have about whether they are a guy, a girl, both, neither, or somewhere in between.
- People often know their gender identity when they are very little, before they start kindergarten, although everyone is different and some people will know when they are younger or older.
- Cisgender is when a person's gender identity is the same as their assigned sex. For example, a doctor says, 'It's a girl!' at a baby's birth, and that child later feels 'Yes, I am a girl.'
- Transgender is when a person's gender identity is not the same as their assigned sex. For example, a doctor says, 'It's a girl!' at a baby's birth, and that child later feels 'No, I'm not a girl.' People may also identify as nonbinary, genderqueer, or some other gender identity.

So how is gender identity different than assigned sex? Correct, gender identity is based on a deep feeling that a person has about themselves."

Making Proud Choices! 5th edition, Teacher's Manual

- Module 1, Activity B, Procedure, Facilitator Note, page 36: "Asking participants to tell you their pronouns is a way of creating a safe space for transgender or gender nonconforming youth. Reinforce that sharing pronouns is optional; some youth may not feel comfortable sharing their pronouns and thus "outing" themselves. Model what you want participants to say by giving your own pronouns. Some transgender youth might have typical pronouns (he/she/his/her/their) or they might request more creative pronouns such as hir or zir. Pronouns don't always line up with what observers might expect based on a person's perceived biological sex. The simple act of requesting pronouns sends

the message that transgender and gender nonconforming youth are welcome and respected in the group.”

- Module 1, Activity C, Procedure, page 39-40: “**Respect diversity:** Let’s keep in mind that there’s diversity in society and in the group. Individuals come from different family backgrounds, different racial and cultural groups and different living situations. Some young people have already had romantic relationships; others aren’t even thinking about it. Some have had sexual intercourse. Some have had sex because they choose to; other’s may have had sex against their will. Some may identify as gay, lesbian, bisexual or straight. Some may identify as male, female or transgender.

Young people may express themselves in ways that don’t conform with their biological sex. There are many ways that youth can express their gender identity.”

Young people may express themselves in ways that don’t conform with their biological sex. There are many ways that youth can express their gender identity.

Define terms related to diversity as needed.

Gender refers to the ideas in a culture or society about the appropriate ways for men and women to dress, behave, think and feel. Ideas about what gender behavior is appropriate change in different cultures and at different times in history. Sometimes one gender is given more power or status than another.

Gender identity is peoples’ inner understanding of what gender they identify with. It may be man, woman, something in between, or something that doesn’t fit these labels. It may be the same as (cisgender) or different from (transgender) the sex they were assigned at birth. Gender identity is unique for each person.

Gender expression is how a person represents or expresses gender identity to others, often through behavior, clothing, hairstyles, voice or body characteristics.”

Positive Prevention Plus (2021), Teacher’s Manual

- Lesson 2, Gender and Sexual Orientation, page 35:

“CONTENT

- Introduction
- Gender and Sexual Orientation
- LGBTQ+ Bias and Its Effects
- Lesson Wrap-Up (Worksheet)

OBJECTIVE

- Define and discuss gender-related terms.

- Identify the importance of acknowledging and accepting diverse gender presentations and sexual orientations.”
- Lesson 2, Gender and Sexual Orientation, Part B, page 39, “**Understanding the Terms**

Human sexuality is a combination of three distinct components.

- **Biological Sex:** A term used to denote whether an individual is male or female, as determined by a physician or other medical professional at the time of birth. This designation is often made solely based upon the examination of an infant’s genitals, but may also involve chromosomes and gonads (ovaries or testicles). Related term: *intersex*.
- **Gender:** Attitudes, feelings, characteristics and behaviors that a given culture associates with being male or female and that are often labeled as ‘masculine’ or ‘feminine.’ Related terms include: *gender role, gender non-conformity, gender identity, cisgender, transgender, gender expression, gender binary, gender expansive*.
- **Sexual Orientation:** A person’s romantic or sexual attraction to people of other and/or the same gender. Common terms used to describe sexual orientation include, but are not limited to: *heterosexual, lesbian, gay, bisexual, pansexual, and queer*.

Biological sex, gender, and sexual orientation vary with each individual. It is important to respect differences and appreciate diversity.”

The “purpose” of a PREP grant award is for states to “carry out personal responsibility education programs consistent with this subsection.” 42 U.S.C. § 713(b)(1). The statute defines PREP as “a program that is designed to educate adolescents on -- (i) both abstinence and contraception for the prevention of pregnancy and sexually transmitted infections, including HIV/AIDS, consistent with the requirements of subparagraph (B); and (ii) at least 3 of the adulthood preparation subjects described in subparagraph (C).” 42 U.S.C. § 713(b)(2).

The statute includes no mention of gender ideology, which is both irrelevant to teaching abstinence and contraception and unrelated to any of the adult preparation subjects described in section 713(b)(2)(C).² The statute neither requires, supports nor authorizes

² 42 U.S.C. § 713(b)(2)(C) lists the following adult preparation subjects: “(i) Healthy relationships, including marriage and family interactions; (ii) 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; (iii) Financial literacy; (iv) Parent-child communication; (v) Educational and career success, such as developing skills for employment preparation, job seeking, independent living, financial self-sufficiency, and workplace productivity; (vi) Healthy life skills, such as goal-setting, decision making, negotiation, communication and interpersonal skills, and stress management.”

teaching students that gender identity is distinct from biological sex or that boys can identify as girls and vice versa; thus, gender ideology is outside the scope of the authorizing statute and any expenditures associated with gender ideology are not allowable, reasonable, or allocable to the PREP grant. See 45 C.F.R. §§ 75.403-405.

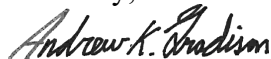
We are aware that these curricula and other program materials were previously approved by ACF. However, the prior administration erred in allowing PREP grants to be used to teach students gender ideology because that approval exceeded the agency's authority to administer the program consistent with the authorizing legislation as enacted by Congress. Wisconsin's current PREP curricula and program materials are out of compliance with the PREP statute and HHS regulations and must be modified. See 45 C.F.R. § 75.303(b) (requiring compliance with all Federal statutes, regulations, and the terms and conditions of the Federal award), §§ 75.403-405 (requiring grant expenditures to be reasonable and allocable in order to be allowable). ACF may impose additional conditions on grantees that fail to comply with any Federal statutes, regulations or terms and conditions that apply to their awards. See 45 C.F.R. § 75.371.

Therefore, ACF instructs Wisconsin to remove all content concerning gender ideology from its curricula, program materials and any other aspects of its program delivery within 60 days of receipt of this letter and provide a copy of the modified materials to ACF for approval.

The content flagged on the pages of this letter provides examples of gender ideology content that does not adhere to the PREP statute;³ Wisconsin is directed to remove these and all similar language throughout their curricula and program materials. Should Wisconsin fail to make the appropriate modifications to its PREP curricula and program materials, ACF may take additional enforcement action. See 45 C.F.R. § 75.371 (allowing HHS to withhold, disallow, suspend, or terminate Federal awards if imposing additional conditions on a grantee does not cure noncompliance).

Thank you for your attention to this matter. Please submit the modified curricula and materials by uploading to the Dropbox links previously provided to you within sixty (60) days, and no later than **Monday, October 27, 2025**, at 11:59 pm. You may email your FYSB Federal Project Officer if you need clarification regarding this request.

Sincerely,



Andrew Gradison
Acting Assistant Secretary
Administration for Children and Families

³ We are not setting forth all of the problematic language in this letter but are providing a general description and examples so that you understand what needs to be removed from the curricula and program materials. If you have any questions about whether language needs to be removed, please contact the Federal Project Officer, Arlisa Britt, arlisa.britt@acf.hhs.gov.