

112TH CONGRESS
1ST SESSION

H. R. 2678

To amend the Public Health Service Act to authorize the Secretary of Health and Human Services to carry out programs to provide youth in racial or ethnic minority or immigrant communities the information and skills needed to reduce teenage pregnancies.

IN THE HOUSE OF REPRESENTATIVES

JULY 28, 2011

Ms. ROYBAL-ALLARD (for herself, Ms. NORTON, Mr. GRIJALVA, Ms. LEE of California, Mr. COHEN, Mrs. MALONEY, and Ms. BASS of California) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To amend the Public Health Service Act to authorize the Secretary of Health and Human Services to carry out programs to provide youth in racial or ethnic minority or immigrant communities the information and skills needed to reduce teenage pregnancies.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Communities of Color
5 Teenage Pregnancy Prevention Act of 2011”.

1 **SEC. 2. FINDINGS.**

2 The Congress finds the following:

3 (1) Teenage pregnancy is one of the most crit-
4 ical issues facing the Nation today. The United
5 States has the highest teenage pregnancy rate of
6 any developed nation, with nearly 750,000 teenage
7 girls (who are 15 to 19 years of age) becoming preg-
8 nant each year, and 82 percent of those pregnancies
9 unplanned.

10 (2) For the first time in more than a decade,
11 between 2005 and 2006, the teenage pregnancy rate
12 in the United States rose 3 percent. The decrease in
13 teenage pregnancy rates in the 1990s was over-
14 whelmingly the result of more and better use of con-
15 traceptives.

16 (3) Nationally, teenage pregnancy has signifi-
17 cant fiscal implications, costing taxpayers at least
18 \$10,900,000,000 annually.

19 (4) Communities of color are disproportionately
20 affected by teenage pregnancy. Fifty-two percent of
21 Latinas and 50 percent of African-American girls
22 will become pregnant at least once before they turn
23 20. In comparison, only 19 percent of non-Hispanic
24 White teenage girls under the age of 20 become
25 pregnant.

1 (5) Between 2007 and 2009, the teenage birth
2 rate decreased for most communities of color, how-
3 ever the birth rates for Hispanic, African-American,
4 and Native American teenagers continue to be much
5 higher than other racial and ethnic groups.

6 (6) Research shows that starting a family too
7 soon may have significant social, educational, and fi-
8 nancial impacts on the lives of young people. Less
9 than half of teenage mothers finish high school and
10 less than 2 percent go on to finish college, making
11 it difficult to find and maintain a job.

12 (7) Research also shows that teenage dating vi-
13 olence and abuse are serious public health problems
14 and are associated with higher levels of teenage
15 pregnancy and unplanned pregnancy. Adolescent
16 girls in physically abusive relationships are three
17 times more likely to become pregnant than non-
18 abused girls.

19 (8) Promoting and building healthy relation-
20 ships are fundamental to preventing teenage preg-
21 nancies and unplanned pregnancies.

22 **SEC. 3. YOUTH PREGNANCY PREVENTION.**

23 Title III of the Public Health Service Act (42 U.S.C.
24 241 et seq.) is amended by adding at the end the following
25 new part:

1 “(3) that have a demonstrated history of engag-
2 ing in a meaningful and significant partnership with
3 such targeted communities.

4 “(c) PROGRAM SETTINGS.—Programs funded
5 through a grant under subsection (a) shall be provided—

6 “(1) through classroom-based settings, such as
7 school health education, humanities, language arts,
8 or family and consumer science education; after-
9 school programs; community-based programs; work-
10 force development programs; and health care set-
11 tings; or

12 “(2) in collaboration with systems that serve
13 large numbers of at-risk youth such as juvenile jus-
14 tice or foster care systems.

15 “(d) PROJECT REQUIREMENTS.—As a condition of
16 receipt of a grant under this section, an entity shall agree
17 that, with respect to information and skills provided
18 through the grant—

19 “(1) such information and skills will be—

20 “(A) age-appropriate;

21 “(B) evidence-based or evidence-informed;

22 “(C) provided in accordance with section
23 39900–5(b); and

24 “(D) culturally sensitive and relevant to
25 the target populations; and

1 “(2) any information provided about contracep-
2 tives shall include the health benefits and side ef-
3 fects of all contraceptives and barrier methods.

4 “(e) EVALUATION.—Of the total amount made avail-
5 able to carry out this section for a fiscal year, the Sec-
6 retary, acting through the Director of the Centers for Dis-
7 ease Control and Prevention and other agencies as appro-
8 priate, shall allot up to 10 percent of such amount to carry
9 out a rigorous, independent evaluation to determine the
10 extent and the effectiveness of activities funded through
11 this section during such fiscal year in changing attitudes
12 and behavior of teenagers with respect to healthy relation-
13 ships and childbearing.

14 “(f) GRANTS FOR INDIAN TRIBES OR TRIBAL ORGA-
15 NIZATIONS.—Of the total amount made available to carry
16 out this section for a fiscal year, the Secretary shall re-
17 serve 5 percent of such amount to award grants under
18 this section to Indian tribes and tribal organizations in
19 such manner, and subject to such requirements, as the
20 Secretary, in consultation with Indian tribes and tribal or-
21 ganizations, determines appropriate.

22 “(g) ELIGIBLE ENTITY DEFINED.—

23 “(1) IN GENERAL.—In this section, the term
24 ‘eligible entity’ means a State, local, or tribal agen-
25 cy; a school or postsecondary institution; an after-

1 school program; a nonprofit organization; or a com-
2 munity or faith-based organization.

3 “(2) PREVENTING EXCLUSION OF SMALLER
4 COMMUNITY-BASED ORGANIZATIONS.—In carrying
5 out this section, the Secretary shall ensure that the
6 amounts and requirements of grants provided under
7 this section do not preclude receipt of such grants
8 by community-based organizations with a dem-
9 onstrated history of effectively working with adoles-
10 cents in racial or ethnic minority or immigrant com-
11 munities or engaged in meaningful and significant
12 partnership with such communities.

13 **“SEC. 39900-2. MULTIMEDIA CAMPAIGNS TO REDUCE**
14 **TEENAGE PREGNANCIES.**

15 “(a) IN GENERAL.—The Secretary shall award com-
16 petitive grants to public and private entities to carry out
17 multimedia campaigns to provide public education and in-
18 crease public awareness regarding teenage pregnancy and
19 related social and emotional issues, such as violence pre-
20 vention.

21 “(b) PRIORITY.—In awarding grants under this sec-
22 tion, the Secretary shall give priority to applicants pro-
23 posing to carry out campaigns developed for racial or eth-
24 nic minority or immigrant communities.

1 “(c) INFORMATION TO BE PROVIDED.—As a condi-
2 tion of receipt of a grant under this section, an entity shall
3 agree to use the grant to carry out multimedia campaigns
4 described in subsection (a) that—

5 “(1) at a minimum, shall provide information
6 on—

7 “(A) the prevention of teenage pregnancy;
8 and

9 “(B) healthy relationship development; and

10 “(2) may provide information on the prevention
11 of dating violence.

12 **“SEC. 39900-3. RESEARCH ON REDUCING TEENAGE PREG-**
13 **NANCIES AND TEENAGE DATING VIOLENCE**
14 **AND IMPROVING HEALTHY RELATIONSHIPS.**

15 “(a) IN GENERAL.—The Secretary, acting through
16 the Director of the Centers for Disease Control and Pre-
17 vention, shall make grants to public and private entities
18 to conduct, support, or coordinate research on teenage
19 pregnancy, dating violence, and healthy relationships
20 among racial or ethnic minority or immigrant communities
21 that—

22 “(1) improves data collection on—

23 “(A) sexual and reproductive health, in-
24 cluding teenage pregnancies and births, among
25 all minority communities and subpopulations in

1 which such data are not collected, including
2 American Indian and Alaska Native youth;

3 “(B) sexual behavior, sexual or reproduc-
4 tive coercion, and teenage contraceptive use
5 patterns at the State level, as appropriate; and

6 “(C) teenage pregnancies among youth in
7 and aging out of foster care or juvenile justice
8 systems and the underlying factors that lead to
9 teenage pregnancy among youth in foster care
10 or juvenile justice systems;

11 “(2) investigates—

12 “(A) the variance in the rates of teenage
13 pregnancy by—

14 “(i) racial and ethnic group (such as
15 Hispanic, Asian, African-American, Pacific
16 Islander, American Indian, and Alaskan
17 Native); and

18 “(ii) socioeconomic status, including
19 as based on the income of the family and
20 education attainment;

21 “(B) factors affecting the risk for youth of
22 teenage pregnancy or dating abuse, including
23 the physical and social environment, level of ac-
24 culturation, access to health care, aspirations

1 for the future, and history of physical or sexual
2 violence or abuse;

3 “(C) the role that violence and abuse play
4 in teenage sex, pregnancy, and childbearing;

5 “(D) strategies to address the disproportio-
6 nate rates of teenage pregnancies and dating
7 violence in racial or ethnic minority or immi-
8 grant communities;

9 “(E) how effective interventions can be
10 replicated or adapted in other settings to serve
11 racial or ethnic minority or immigrant commu-
12 nities; and

13 “(F) the effectiveness of media campaigns
14 in addressing healthy relationship development,
15 dating violence prevention, and teenage preg-
16 nancy; and

17 “(3) tests research-based strategies for address-
18 ing high rates of unintended teenage pregnancy
19 through programs that emphasize healthy relation-
20 ships and violence prevention.

21 “(b) PRIORITY.—In carrying out this section, the
22 Secretary shall give priority to research that incor-
23 porates—

24 “(1) interdisciplinary approaches;

1 “(2) a strong emphasis on community-based
2 participatory research; or

3 “(3) translational research.

4 **“SEC. 39900–4. HHS ADOLESCENT HEALTH WORK GROUP.**

5 “(a) PURPOSE.—Not later than 30 days after the
6 date of the enactment of this part, the Secretary shall di-
7 rect the interagency adolescent health workgroup within
8 the Office of Adolescent Health of the Department of
9 Health and Human Services to—

10 “(1) include in the work of the group strategies
11 for teenage dating violence prevention and healthy
12 teenage relationships with a particular focus among
13 racial or ethnic minority or immigrant communities;
14 and

15 “(2) with respect to including such strategies,
16 consult, to the greatest extent possible, with the
17 Federal Interagency Workgroup on Teen Dating Vi-
18 olence formed under the leadership of the National
19 Institute of Justice of the Department of Justice.

20 “(b) REPORT REQUIREMENT.—The Secretary,
21 through the Office of Adolescent Health, shall periodically
22 submit to Congress a report that—

23 “(1) includes a review of the evidence-based
24 programs on preventing teenage pregnancy, which
25 are carried out and identified by the Office; and

1 “(2) identifies the programs of the Department
2 of Health and Human Services that include teenage
3 dating violence prevention and the promotion of
4 healthy teenage relationships as part of a strategy to
5 prevent teenage pregnancy.

6 **“SEC. 39900-5. GENERAL GRANT PROVISIONS.**

7 “(a) APPLICATIONS.—To seek a grant under this
8 part, an entity shall submit an application to the Secretary
9 in such form, in such manner, and containing such agree-
10 ments, assurances, and information as the Secretary may
11 require.

12 “(b) ADDITIONAL REQUIREMENTS.—A grant may be
13 made under this part only if the applicant involved agrees
14 that information, activities, and services provided under
15 the grant—

16 “(1) will be evidence-based or evidence in-
17 formed;

18 “(2) will be factually and medically accurate
19 and complete; and

20 “(3) if directed to a particular population
21 group, will be provided in an appropriate language
22 and cultural context.

23 “(c) TRAINING AND TECHNICAL ASSISTANCE.—

24 “(1) IN GENERAL.—Of the total amount made
25 available to carry out this part for a fiscal year, the

1 Secretary shall use 10 percent to provide, directly or
2 through a competitive grant process, training and
3 technical assistance to the grant recipients under
4 this part, including by disseminating research and
5 information regarding effective and promising prac-
6 tices, providing consultation and resources on a
7 broad array of teenage and unintended pregnancy
8 and violence prevention strategies, and developing
9 resources and materials.

10 “(2) COLLABORATION.—In carrying out this
11 subsection, the Secretary shall collaborate with enti-
12 ties that have expertise in the prevention of teenage
13 pregnancy, healthy relationship development, minor-
14 ity health and health disparities, and violence pre-
15 vention.

16 **“SEC. 39900-6. DEFINITIONS.**

17 “In this part:

18 “(1) MEDICALLY ACCURATE AND COMPLETE.—
19 The term ‘medically accurate and complete’ means,
20 with respect to information, activities, or services,
21 verified or supported by the weight of research con-
22 ducted in compliance with accepted scientific meth-
23 ods and—

24 “(A) published in peer-reviewed journals,
25 where applicable; or

1 “(B) comprising information that leading
2 professional organizations and agencies with
3 relevant expertise in the field recognize as accu-
4 rate, objective, and complete.

5 “(2) RACIAL OR ETHNIC MINORITY OR IMMIG-
6 GRANT COMMUNITIES.—The term ‘racial or ethnic
7 minority or immigrant communities’ means commu-
8 nities with a substantial number of residents who
9 are members of racial or ethnic minority groups or
10 who are immigrants.

11 “(3) REPRODUCTIVE COERCION.—The term ‘re-
12 productive coercion’ means, with respect to a person,
13 coercive behavior that interferes with the ability of
14 such person to control the reproductive decision-
15 making of such person, such as intentionally expos-
16 ing such person to sexually transmitted infections; in
17 the case such person is a female, attempting to im-
18 pregnate such person against her will; intentionally
19 interfering with the person’s birth control; or threat-
20 ening or acting violent if the person does not comply
21 with the perpetrator’s wishes regarding contracep-
22 tion or the decision whether to terminate or continue
23 a pregnancy.

24 “(4) YOUTH.—The term ‘youth’ means individ-
25 uals who are 11 to 19 years of age.

1 **“SEC. 39900-7. REPORTS.**

2 “(a) REPORT ON USE OF FUNDS.—Not later than
3 1 year after the date of the enactment of this part, the
4 Secretary shall submit to Congress a report on the use
5 of funds provided pursuant to this part.

6 “(b) REPORT ON IMPACT OF PROGRAMS.—Not later
7 than March 1, 2016, the Secretary shall submit to Con-
8 gress a report on the impact that the programs under this
9 part had on reducing teenage pregnancies.

10 **“SEC. 39900-8. AUTHORIZATION OF APPROPRIATIONS.**

11 “(a) IN GENERAL.—There are authorized to be ap-
12 propriated to carry out this part such sums as may be
13 necessary for each of the fiscal years 2012 through 2016.

14 “(b) AVAILABILITY.—Amounts appropriated pursu-
15 ant to subsection (a)—

16 “(1) are authorized to remain available until ex-
17 pended; and

18 “(2) are in addition to amounts otherwise made
19 available for such purposes.”.

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