



Administration for Children and Families

Administration on Children, Youth and Families – Family and Youth Services Bureau

Standing Notice of Funding Opportunity for Title V State Sexual Risk Avoidance Education

HHS-2022-ACF-ACYF-SRAE-0113

Application Due Date for FY 2022: June 20, 2022

Application Due Date for FY 2023: October 3, 2022

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Signature

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Date

**Standing Announcement for Title V State Sexual Risk Avoidance Education
HHS-2022-ACF-ACYF-SRAE-0113
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DEPARTMENT OF HEALTH AND HUMAN SERVICES
ADMINISTRATION FOR CHILDREN AND FAMILIES

Program Office: Family and Youth Services Bureau, Administration on Children, Youth and Families

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Executive Summary:

The Administration for Children and Families (ACF), Administration on Children, Youth and Families (ACYF), Family and Youth Services Bureau (FYSB) is accepting mandatory formula grant applications from states and territories for the development and implementation of the Title V State Sexual Risk Avoidance Education (SRAE) Program. The purpose of the Title V State SRAE program is to fund states/territories to implement education exclusively on sexual risk avoidance that teaches participants to voluntarily refrain from non-marital sexual activity and other risky behaviors. This announcement sets forth the application requirements, the application process, and other administrative and fiscal requirements on how to apply for funding in FY 2022 and FY 2023.

To qualify for funding in FY 2022, states must submit an application and state plan for review and approval prior to the award of funds. Applications for FY 2022 may be awarded with restrictions on the drawdown of awarded funds until the Post-Award State Plans have been approved by FYSB.

States are expected to submit program plans that are medically accurate and complete, age-appropriate based on adolescent learning and developmental theories for the age group receiving the education, and be culturally appropriate, recognizing the experiences of youth from diverse communities, backgrounds, and experiences.

All programs incorporated by a state must ensure that sexual risk avoidance education has a holistic approach and demonstrate societal benefits with the focus being on the future. These projects must focus on the social, psychological, and health gains to be realized by refraining from non-marital sexual activity and engaging in healthy relationships.

I. PROGRAM DESCRIPTION

A. Statutory Authority

The Title V SRAE program is authorized and funded by Section 510 of the Social Security Act (42 U.S.C. § 710), as amended by Section 50502 of the Bipartisan Budget Act of 2018 (Pub. L. No. 115-123) and extended by Division CC, Title III, Section 303 of the Consolidated Appropriations Act, 2021 (Pub. L. No. 116-260), Title V Social Security Act, Section 510, Public Law 115-123.

B. Background

Congress amended Section 510 of the Social Security Act (42 U.S.C. § 710) in fiscal year (FY) 2018 to enable states, territories, or other entities to implement education exclusively on sexual risk avoidance (SRA). Title V State SRAE supports funding to states and territories to provide education to youth that normalizes the optimal health behavior of avoiding non-marital sexual activity. The program is designed to teach youth personal responsibility, self-regulation, goal setting, healthy decision-making, a focus on the future, and the prevention of youth risk behaviors such as drug and alcohol usage without normalizing teen sexual activity.

According to the Centers for Disease Control and Prevention (CDC) data collected in 2018, the proportion of high school students who had ever had sexual intercourse significantly decreased for all youth. There were also decreased reports among ninth and tenth grade students, non-Hispanic black students in all grades, and Hispanic students in ninth, tenth, and eleventh grades.[1]

In 2019, the birth rate for youth ages 15-19 reached a low of 16.6 births per 1,000 women, which decreased 5 percent from 2018 [2]. Additionally, the birth rate for teenagers declined for both younger (aged 15–17) and older (aged 18–19) teenagers 7.92 and 32.3 births per 1,000 women, respectively [2]. Although there has been a significant decline in the teen birth rate for all groups, disparities still exist. The latest CDC data indicate that young people ages 15 to 24 account for half of new sexually transmitted diseases reported annually [3]. Adolescents who are at greatest risk of sexually transmitted infections (STI) and unintended pregnancies are a complex and dynamic group. Thus, a targeted and holistic approach is essential to preventing teen pregnancy and other risk behaviors.

C. Title V State SRAE Program Overview

SRAE Goal and Objectives

The goal of the Title V State SRAE program is to provide messages to youth that normalize the optimal health behavior of avoiding non-marital sexual activity. The objectives of the Title V State SRAE program are to:

1. Implement curricula and/or strategies that include medically accurate and complete information based on adolescent learning and developmental theories for the age group receiving the education.
2. Select SRA curricula and/or strategies that is culturally appropriate, and recognize the experiences of youth from diverse communities, backgrounds, and experiences.
3. Teach SRA skills through methods that do not normalize teen sexual activity.
4. Target youth ages 10 to 19.

Title V State SRAE Program Requirements

States are encouraged to design SRAE projects that address the following requirements:

1. Goals and Logic Model(s)
2. Medically Accurate Materials and Culturally and Age-Appropriate Approaches
3. Evidence-Informed Interventions and Strategies
4. Positive Youth Development Framework
5. Elements of Equity
6. Target Population
7. Referrals to Healthcare and Other Services
8. Local Evaluation (optional)
9. National Evaluation
10. Performance Measures
11. Sustainability Plan

Goal(s) and Logic Models

States should submit the goal(s) and logic models for all state-led programs or subrecipient programs in their post-award state plans. Logic models demonstrate how the process (specified inputs, activities, and outputs) will lead to the enumerated outcomes, and ultimately, the achievement of the goal(s). Where possible, applicants should specify short- and long-term goals and provide the following:

- Up to six outcomes that clearly state expected results or benefits of the intervention proposed and link with the goal(s).
- A logic model demonstrating how proposed inputs and activities will lead to the outputs and outcomes, and the ultimate achievement of the goal(s).
- Proposed outcomes that are specific, measurable, achievable, realistic, and time-framed (S.M.A.R.T.).

Further information on sources available for developing programs and logic models is provided in *Appendix B*.

Medically Accurate Materials and Culturally and Age-Appropriate Approach

Title V State SRAE projects must provide information that is medically accurate and complete. Medical information must be verified or supported by the weight of research. The research must

be conducted in compliance with accepted scientific methods and published in peer-reviewed journals, where applicable, or comprise information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete. Program materials, such as texts, supplements, workbooks, videos, flyers, handouts, posters, and flash cards should be reviewed in comparison to current medical statements of fact in accordance with the latest, scientifically supported information.

For states that provide information on contraception, the information must be medically accurate and complete and ensure that youth understand that contraception offers physical risk reduction, but not risk elimination; and the education cannot include demonstrations, simulations, or distribution of contraceptive devices.

States must use culturally sensitive interventions that incorporate the norms, beliefs, and values of the target population into the intervention [4]. The proposed project should demonstrate competence in providing socially, linguistically, and culturally appropriate interventions with the target population.

Title V State SRAE projects must provide age-appropriate information and activities. The topics, messages, and teaching methods implemented by the project must be consistent with the developmental and social maturity of the program participants and emphasize sexual delay until marriage as normative behavior.

States will be required to take appropriate action to correct any medically inaccurate or age-inappropriate information discovered by ACF during the grant project period. As requested, states must submit curricula for FYSB to conduct a medical accuracy review and respond to requests to make modifications to ensure curricula and other program implementation materials are medically accurate and complete.

Evidence-Informed Interventions and Strategies

States are not required to choose from a prescribed list, as there is no mandated list of curricula required by FYSB for Title V State SRAE. All curricula used by funded recipients, as well as their subrecipient(s), must be compliant with the Title V State SRAE statute (https://www.ssa.gov/OP_Home/ssact/title05/0510.htm) and use an evidence-informed approach and/or effective strategies to educate youth on how to avoid risks that could lead to non-marital sexual activity.

To ensure effective programming, the Title V State SRAE program must, at a minimum, implement evidence-informed programming that complies with the following requirements:

- Provide data that demonstrate how the selected intervention and overall proposal systematically applies core curriculum components that have been found to be effective in positive youth behavior change, especially delaying initiation of sexual activity until marriage, returning to a lifestyle without sex, and/or refraining from non-marital sex.
- Teach the benefits associated with personal responsibility, self-regulation, goal setting, healthy decision making, healthy relationships, avoiding poverty, resisting sexual

coercion and dating violence, and other youth risk behaviors, such as drug and alcohol usage.

- Provide formal training for facilitators/educators on the program strategies, approaches, and interventions. This training must be delivered by professionals who can provide follow-up technical assistance (TA) to facilitators.
- Link program participants to services with local community partners and other agencies that support the health, safety, and well-being of program participants. The partnering agencies should share a commitment for optimal health outcomes.
- Education in sexual risk avoidance must be the exclusive purpose of the grant.

Many of these required components have been identified in assessment tools, such as the [CDC Health Education Curriculum Assessment Tool \(HECAT\)](#), which provides critical elements for success in implementing programs to positively change youth behavior. There may be other tools and resources available to assess curricula.

ACF encourages states to review evidence-informed or evidence-based programs to determine whether the interventions can be adapted, subject to copyright restrictions; implemented with fidelity; and adhere to the core curriculum components to meet the requirements of programs designed for this grant. The selected interventions must be evidence-informed or have evidence of effectiveness with the target populations and adhere to the following requirements:

- Interventions and/or strategies selected must be medically accurate and age-appropriate with regard to the developmental stage of the intended audience, and culturally appropriate, recognizing the experiences of youth from diverse communities, backgrounds, and experiences.
- Education on SRA must ensure that the unambiguous and primary emphasis and context for each topic described below is a message to youth that normalizes the optimal health behavior of delaying sexual activity until marriage.

In accordance with the Title V State SRAE legislation, interventions must address the following topics:

- a) The holistic, individual, and societal benefits associated with personal responsibility, self-regulation, goal setting, healthy decision-making, and a focus on the future.
- b) The advantage of refraining from non-marital sexual activity to improve the future prospects and physical and emotional health of youth.
- c) The increased likelihood of avoiding poverty when youth attain self-sufficiency and emotional maturity before engaging in sexual activity.
- d) The foundational components of healthy relationships and their impact on the formation of healthy marriages and safe and stable families.
- e) The effect of other youth risk behaviors, such as drug and alcohol usage, on increasing the risk for teen sex.
- f) Strategies on how to resist and avoid, and receive help regarding, sexual coercion and dating violence, recognizing that—even with consent—teen sex remains a youth risk behavior.

For programs that provide information on contraception, the information must be medically accurate and complete, and ensure students understand that contraception offers physical risk reduction, but not risk elimination. Education involving contraception cannot include demonstrations, simulations, or distribution of contraceptive devices.

Curricula and any related materials must be in accordance with 45 CFR § 87.3, Equal Treatment for Faith Based Organizations. For more information, please reference the Administrative and National Policy Requirements, which can be found on the ACF website at: <https://www.acf.hhs.gov/administrative-and-national-policy-requirements#chapter-2>.

Positive Youth Development Approach

States must demonstrate in their state plan the incorporation of Positive Youth Development (PYD) as part of any risk avoidance strategies to help participants build healthy life skills and protective factors that mitigate the impact of past and future negative factors, empower participants to make healthy decisions, provide tools and resources to prevent pregnancy and STIs, and prevent youth engagement in other risky behaviors. The program approach should also include service linkages to local community partners that support the safety and well-being of the target population. For more information on PYD, please see: <https://aspe.hhs.gov/execsum/positive-youth-development-united-states-research-findings-evaluations-positive-youth-development-programs>.

Elements of Equity:

In accordance with CDC data, a disproportionate number of Hispanic, non-Hispanic Black teens, and American Indian/Alaska Native teens have significantly higher than the national average of teen birth rates. Additionally, certain geographic areas of the United States experience disparities in teen births, such as rural and Southern states and counties. To address these disparities, SRAE recipients should specifically target these populations.

Applicants should describe how they will reach underrepresented and underserved populations. FYSB's Adolescent Pregnancy Prevention program will ensure programs address potential inequities and barriers to participation by assessing performance measures survey data on program participants demographics, such as race, gender, and ethnicity, to ensure representation of underrepresented and underserved populations. The applicant should describe how they will recruit and retain historically underrepresented and underserved populations within the targeted community. The applicant should describe how they will coordinate, communicate, and engage with community-based organizations whose mission is to reach underrepresented and underserved populations. Lastly, applicants should describe staff development and training opportunities to increase knowledge of gender, race, and equity.

Target Populations

Title V State SRAE programs must provide services to youth populations between the ages of 10 and 19. In addition, SRAE programs may target services to vulnerable youth populations to include, but not limited to, the following: youth living in under-resourced regions and areas with high rates of teen births and STIs; culturally underrepresented youth populations, especially

Hispanic, African American, or Native American teenagers; 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.

Referrals to Healthcare and Other Services

Title V State SRAE programs may only provide education to youth on SRA. Funds may not be used to provide separate services, such as health care, educational services (e.g., tuition for formal K-12/GED classes), career development, or counseling services (e.g., substance abuse including alcohol, tobacco cessation, mental health issues, and intimate partner violence). As needs are identified, recipients should provide referrals for necessary services but may not pay for the services themselves with ACF funding.

Local Evaluation

States have the option to conduct a local evaluation of their Title V State SRAE projects. States that choose to conduct local evaluations must provide a description of the plan to conduct recipient-specific evaluations, also called “local evaluations.” The purpose of local evaluations is to contribute to the evidence base for SRAE programming and provide an opportunity for recipients to learn whether desired outcomes are being achieved; target areas for improved program quality; and/or examine whether the program(s) being implemented is effective. States may only propose one local evaluation. The evaluation plan must answer one or more specific research question(s) related to the programming implemented and funded by the grant. The research question(s) should drive the local evaluation, including its design, methods, data collection, and analyses.

ACF is interested in supporting high-quality, well-designed local evaluations from which programs will learn and expand the evidence base. ACF will work in collaboration with states to disseminate information about the evaluation findings. In accordance with legislation, any SRAE evaluation conducted or supported should be:

- Rigorous;
- Evidence-based; and
- Designed and conducted by independent researchers who have experience in conducting and publishing research or evaluation studies in peer-reviewed outlets.

(See *Section E. Glossary Terms* for definitions.)

States that propose to conduct a local evaluation should ensure that the evaluation:

- Answers important questions of interest to the state and to the larger field of SRA education;
- Includes an appropriate evaluation design;

- Addresses SRA outcomes; specifically, sexual activity or other sexual risk behaviors, or reducing pregnancy among youth;
- Addresses relevant positive youth development outcomes, including self-regulation;
- Meets expectations of rigor that ACF provides through a system of TA for recipients and their local evaluators;
- Establishes scientific methods for measuring the impact of an intervention or program model in changing behavior (specifically, sexual activity or other sexual risk behaviors, or reducing pregnancy among youth); or
- Adheres to other evidence-based methodologies established by the HHS Secretary.

Three types of methodologies are permitted for local evaluations:

- Impact evaluations: (a) efficacy/effectiveness studies that have a control/comparison group that either receives no services or services distinct from the intervention group, and (b) measure behavioral outcomes beyond the period directly following the end of programming, when feasible;
- Comprehensive needs assessments: scientific/systematic investigations that identify needs and challenges around a given issue, determine root causes, identify current barriers to addressing the need, and set priorities for future actions; and
- Descriptive studies: studies that both document and link program implementation (i.e., activities/components/program delivery) and participant outcomes.

Well-conducted evaluations require time for planning, implementation, analysis, reporting, and dissemination activities. States are advised to develop evaluation timelines that are sufficient for conducting impact studies, comprehensive needs assessments, or descriptive studies that document and link program implementation and participant outcomes. FYSB also recommends applicants review current SRAE evaluation resources to inform the evaluation plan, including research questions and evaluation design. These resources can be found at:

<https://sraene.com/search-resources>.

Local evaluations should be designed and conducted by independent researchers, called “local evaluators,” who have experience in conducting evaluations of youth-focused programs in the community and publishing research in peer-reviewed outlets. The expertise of the evaluator should match the methodology for the proposed local evaluation. Examples of independent evaluators may be universities, research organizations, evaluation consultants, or other institutions with experience in conducting high-quality evaluations of community programs.

In order to maximize learning from these projects, ACF will provide TA and/or training on evaluation planning, implementation, analysis, reporting, and dissemination to states conducting local evaluations, and to their local evaluators. As part of the TA, recipients may also be asked to complete standardized forms and templates describing their evaluation plans and submit evaluation updates. These forms and templates are subject to Office of Management and Budget (OMB) approval under the Paperwork Reduction Act (PRA). ACF will obtain OMB approval prior to requiring states to complete the forms and/or templates. ACF will review and provide

suggestions to states to improve plans prior to the initiation of local evaluation activities. Improvements may include reconsiderations of evaluation design and funding.

Upon completion of local evaluations, states may be required to submit a final report to ACF. The final report template is subject to OMB approval under the PRA, which ACF will obtain prior to use. Although ACF may provide technical support to states that propose local evaluations, the states will ultimately decide what data is to be collected and maintain oversight of the entity conducting the evaluation, as well as the subrecipient(s) that they select to participate in the evaluation.

Applicant funding levels will not be affected if a local evaluation is not proposed. Applicants should carefully assess whether they have the capacity and sufficient funding allocated to conduct a local evaluation within the short project period.

If the applicant chooses to conduct a local evaluation, describe the amount of funding that will be allocated towards conducting an evaluation, within the allowable amount (up to 20 percent of total budget).

Performance Measurement

All recipients and sub-recipient(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). The purpose of the performance measures is to monitor and provide feedback about whether recipients are implementing SRAE programs as intended and to demonstrate progress towards expected objectives. Performance measures can also create a foundation for program improvement efforts, prompted by federal, recipient, and program providers' examination of the data. Performance measures provide information based upon the three categories of data collection listed below while rigorous evaluations assess program effectiveness and impact.

SRAE performance measures will be distributed to funded recipients, who will be required to collect and report on these measures approximately twice a year. ACF has defined measures at the recipient, provider, and program levels. For some performance measures, recipients provide data about activities they undertake directly at the recipient level. For other measures, data are based on information about each separate provider that serves youth directly (i.e., provider level) or each program model that a provider is implementing (i.e., program level). A program model is defined as the core curriculum plus other lessons or activities that may be integrated with the core curriculum to meet the SRAE requirements. In addition, data are also collected from the youth themselves through participant entry and exit surveys. Ultimately, recipients are responsible for submitting performance measures from the recipient, provider, and program levels to ACF.

The following are the three categories of SRAE performance measures for data collection and submission:

1. Structure, cost, and support for program implementation;
2. Attendance, reach, and dosage; and
3. Participants' characteristics, behaviors, program experiences, and perceptions of effects (through participant entry and exit surveys).

Applicants applying for funds must indicate their agreement to collect the SRAE performance measures and submit the data to ACF. 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 SRAE performance measures. FYSB will provide training on how to conduct performance measures data collection and reporting. 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.

For more information about the SRAE performance measures, including definitions, survey instruments, and data collection tools, please see www.sraepas.com.

NOTE: Consistent with the Paperwork Reduction Act (PRA) of 1995, (44 U.S.C. § 3501-3521), under this NOFO, ACF will not conduct or sponsor, and a person is not required to respond to, a collection of information covered by such Act, unless it displays a currently valid OMB control number. ACF has obtained OMB approval (OMB Control Number 0970-0536; Expiration Date October 31, 2022) under PRA to request and collect performance measures.

National Evaluation

ACF may select a subset of projects, such as state-led programs or subrecipient programs, funded under this Notice of Funding Opportunity (NOFO) to participate in one or more rigorous federal evaluations. All states and subrecipients will be required to participate, if selected, and must give their assurance that they will participate. As part of these national evaluation efforts, recipients and subrecipients may also be required to complete surveys, standardized forms, and templates. These instruments are subject to OMB approval under the PRA. ACF will obtain OMB approval prior to launching any evaluations.

Sustainability Plan

States are to develop a sustainability plan that includes their subrecipients and collaborating partners. The plan should detail how the proposed project activities will continue after federal funding ends. States are encouraged to have their funded providers develop a plan to sustain key

elements of their grant-supported projects (e.g., strategies, or services and interventions) that have been effective in improving practices and outcomes for youth and families.

D. Assurances

The acceptance of federal funds under this NOFO will signify agreement by the recipient that it will include in their application/state plan the following assurances:

- Have the project fully functioning within 90 days following the Notice of Award (NOA) for the grant.
- Formally train facilitators/educators in the selected program components and strategies by professionals who can provide follow-up TA to facilitators;
- Budget the annual costs of sending at least two key staff persons to attend the 3-day Annual Adolescent Pregnancy Prevention Program Grantee Conference to be tentatively held in the Atlanta, Georgia, in 2023.
- Budget the annual costs for at least two staff to attend a minimum of one of two topical training sessions offered each year of the project in areas such as Washington, DC; Portland, Oregon; and Boston, Massachusetts, or through a virtual platform.
- Collect and report on OMB-approved federal SRAE performance measures (recipient, partners, and subrecipient(s)).
- For states and subrecipients conducting local evaluations, participate in training and TA provided by the federal government and follow related guidance provided by ACF/FYSB.
- Participate in a recipient orientation webinar. The webinar will be held shortly after the official award date.
- Develop a sustainability plan with any proposed subrecipients and collaborating partners to create self-sufficiency and continue program activities after federal funding ends.
- Agree to participate in the national evaluation, if selected.
- Participate in a medical accuracy review of selected curricula sponsored by FYSB.

E. Glossary of Terms

The terms Age-Appropriate, Medically Accurate and Complete, Rigorous, and Youth are defined according to the legislation at 42 U.S.C. § 710(e). All other terms are defined by applicable research for the purposes of this NOFO.

Activities – All the actions needed to prepare for and carry out the program. This includes program and financial management, intervention activities, training activities, and staff debriefings.

Age-Appropriate – Information that is suitable (in terms of topics, messages, and teaching methods) to the developmental and social maturity of the particular age or age group of children or adolescents, based on developing cognitive, emotional, and behavioral capacity typical for the age or age group. [Section 510(e)(1) of the Social Security Act (42 U.S.C. §710(e)(1))]

Comprehensive Needs Assessment – Scientific/systematic investigations that identify needs and challenges in an area, determine root causes, identify current barriers to addressing the needs, and set priorities for future actions.

Dating Violence – Physical, sexual, emotional, or verbal abuse from a romantic or sexual partner.

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

Equity – The consistent and systematic fair, just, and impartial treatment of all individuals, including individuals who belong to underserved communities that have been denied such treatment, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders, and other persons of color; members of religious minorities; LGBTQ+ persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.

Evidence-Based – Interventions, strategies, approaches, and/or program models that have been evaluated using rigorous evaluation design, such as randomized controlled or high-quality quasi-experimental trials, and that have demonstrated positive impacts for youth, families, and communities.

Evidence-Informed – Interventions, strategies, approaches, and/or program models that bring together the best available research, professional expertise, and input from youth and families to identify and deliver services that have promise to achieve positive outcomes for youth, families, and communities.

Goal Setting – The process of deciding what to accomplish and devising a plan to achieve the desired result(s).

Healthy Relationships – Peer, romantic, marriage, family, and other interactions that are based on trust, honesty, and respect and allow adolescents to feel supported, connected, and independent. In healthy relationships, key elements are communication, appropriate boundaries, empathy, effective conflict resolution, and resistance of peer pressure.

Impact Evaluation – Efficacy/effectiveness study with a control/comparison group receiving no services or distinct services from the intervention group.

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

Medically Accurate and Complete – Medical information that is verified or supported by the weight of research conducted in compliance with accepted scientific methods and (a) published in peer-reviewed journals, where applicable, or (b) comprising information that leading professional organizations and agencies with relevant expertise in the field recognize as accurate, objective, and complete. [Section 510(e)(2) of the Social Security Act (42 U.S.C. §710(e)(2))]

Objectives – The specific and measurable actions that support the expected result of the program.

OPDIV – An operating division or an HHS administrative unit led by an Assistant Secretary and reporting directly to the Secretary.

Outcomes – The intended effects of the implemented program or program elements, such as an increase in knowledge, development of skills, and behavior changes.

Performance Measures – Indicators that are designed to collect data for program monitoring, improvement, and reporting purposes.

Rigorous – With respect to research or evaluation, using established scientific methods for measuring the impact of an intervention or program model in changing behavior (specifically sexual activity or other sexual risk behaviors) or reducing pregnancy among youth, or other evidence-based methodologies established by the Secretary. [Section 510(e)(3) of the Social Security Act (42 U.S.C. §710(e)(3))]

Self-Regulation – The act of managing thoughts and feelings to enable goal-directed actions, including a variety of actions necessary for success in school, relationships, and the workplace.

Youth – One or more individuals who have attained age 10 but not age 20. [Section 510(e)(4) of the Social Security Act (42 U.S.C. §710(e)(4))]

F. REFERENCES

[1] Centers for Disease Control and Prevention Youth Risk Behavior Survey Data Summary Trends Report 2009-2019, (2020).

https://www.cdc.gov/healthyyouth/data/yrbs/yrbs_data_summary_and_trends.htm

[2] Hamilton, B.E., Martin, J.A., & Osterman, M.J.K., et al. (2020). Births: Provisional Data for 2019. National vital statistics report; Hyattsville, MD: National Center for Health Statistics.

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[3] Centers for Disease Control and Prevention (2019). Sexually Transmitted Disease Surveillance Atlanta: U.S. Department of Health and Human Services. Retrieved online at:

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[4] Hodge, D. R., Jackson, K. F., & Vaughn, M. G. (2010). Culturally Sensitive Interventions and Health and Behavioral Health Youth Outcomes: A Meta-Analytic Review. *Social Work in Health Care* 49:5, 401-423. Retrieved online at:

<https://www.tandfonline.com/doi/abs/10.1080/00981381003648398>

II. FEDERAL AWARD INFORMATION

A. Expenditure Period

Each fiscal year allocation will remain available for expenditure by the state through the end of the succeeding fiscal year. For example, FY 2022 allocations through this announcement would remain available for expenditure by the state until September 30, 2023. FY 2023 allocations through this announcement will remain available for expenditure by the state through September 30, 2024.

Recipients cannot request to carry over funds beyond the grant award expenditure period. The chart below provides a timeline of the budget periods for FY 2022 and FY 2023 awards.

<u>Fiscal Year</u>	<u>Applicant/Recipient Action Required</u>	<u>Project Period End Date for Obligation</u>	<u>Fund Expenditure</u>
2022	Submit application to receive ACF approval.	September 30, 2023	All obligated funds must be expended by December 30, 2023.
2023	Recipient will submit Letter of Intent and applicant will submit an application to receive ACF approval.	September 30, 2024	All obligated funds must be expended by December 30, 2024.

The process for fulfilling requirements necessary to use FY 2022 or FY 2023 Title V State SRAE funding requires the submission of an application for funding, which will include the federally required standard application documents, assurances, and other documents as outlined in *Section IV.D. Forms, Assurances, and Certifications* of this NOFO. The application also includes the implementation plan as outlined in *Section IV. E, Application and Submission Information, The Project Description*.

States are eligible to apply for FY 2022 and FY 2023 funding under this announcement. States will not be required to submit full applications after the initial funding year, unless there are material changes made to the program. Instead, states receiving funding in FY 2022 will be required to submit a written letter of intent and updated state plan to receive funding for FY 2023. ACF will provide states with guidance for submitting any updates to their applications and state plans. States planning to conduct a local evaluation must include with their letter of intent, an updated evaluation plan as part of the request for FY 2022 and FY 2023 funding.

States that do not submit an application in FY 2022 are eligible to apply for funding in FY 2023 and will be required to submit both an application and state plan on the due date found on the cover page of this announcement.

In states where Title V State SRAE awards were not made in FY 2022 or FY 2023, unexpended annual state allotments for FY 2022 and FY 2023 will be utilized to award competitive grants to local organizations and entities for the same purpose and in the same state in FY 2022 and FY

2023. A separate NOFO will be published regarding these discretionary grants, per the Title V SRAE legislation.

Anticipated Total Funding

A total of \$60,000,000 is available for FY 2022 awards, and it is anticipated that \$60,000,000 will be available for awards in FY 2023.

Allocations

Grants awarded to each state are determined by a formula using the state's proportion of low-income children compared to the total number of low-income children in the United States, based on the most recent Census data for children in poverty. For each fiscal year, the estimated allotment for each state or territory will be updated based on the most current available census data and will be communicated to states by October of the preceding fiscal year. Census data are unavailable for the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau. Thus, the allocations for these three entities are based on the amounts allocated to them by HHS in prior fiscal years. **See Appendix A for FY 2022 and FY 2023 allotments.**

Approved Application

States that submit an application for FY 2022 are anticipated to receive a grant award by July 20, 2022.

Funding Restrictions

Funds under this announcement cannot be used for the following purposes:

- To supplant or replace current public or private funding;
- To supplant ongoing or usual activities of any organization involved in the project;
- To purchase or improve land, or to purchase, construct, or make permanent improvements to any building;
- To reimburse pre-award costs;
- To support planning efforts and other activities associated with the program or application; or
- For fundraising, political education, or lobbying activities.

Approval Status

Upon completion of the review of the application, ACF will make notification to the recipient on the approval status. The Notice of Award (NOA) will be issued by the ACF Office of Grants Management (OGM).

B. Terms and Conditions

General Terms and Conditions applicable to mandatory award programs and additional financial requirements specific to this program can be found at:

<https://www.acf.hhs.gov/grants/mandatory-formula-block-and-entitlement-grants>

III. ELIGIBILITY INFORMATION

A. Eligible States/Territories

For purposes of this announcement, 59 entities are eligible, including all 50 states, the District of Columbia, Puerto Rico, U.S. Virgin Islands, Guam, American Samoa, Commonwealth of the Northern Mariana Islands, Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

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

Sub-awards

States are allowed to use awarded funding to make sub-awards. States are required to verify the medical accuracy of all materials used by subrecipients.

B. Additional Information on Eligibility

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

All applicants must have a Data Universal Numbering System (DUNS) Number ([http:// fedgov.dnb.com /webform](http://fedgov.dnb.com/webform)) and an active registration with the System for Award Management (SAM.gov/www.sam.gov).

Obtaining a DUNS Number may take 1 to 2 days.

All applicants are required to maintain an active SAM registration until the application process is complete. If a grant is awarded, registration at SAM.gov must be active throughout the life of the award.

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

This action should allow you time to resolve any issues that may arise. Failure to comply with these requirements may result in your inability to submit your application through Grants.gov or prevent the award of a grant. Applicants should maintain documentation (with dates) of their

efforts to register for, or renew, a registration at SAM. User Guides are available under the “Help” tab at <https://www.sam.gov>.

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

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

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

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

IV. APPLICATION AND SUBMISSION INFORMATION

A. Application Submission Requirements

Mandatory grant recipients are required to use the [Online Data Collection System \(OLDC\) within Grantsolutions](#), to submit the Application for Federal Assistance SF-424 Mandatory Form (SF-424M) and upload all required documents. The form is available to applicants and recipients at <http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html>. ACF will not accept paper applications or those submitted via email or facsimile, without an exemption.

Application and State Plan Checklist

FY 2022 Title V State Sexual Risk Avoidance Education Program	
Application for Funding and State Plan Checklist	
FY 2022 – June 20, 2022	
FY2023 – October 3, 2022	
1.	Application for Federal Assistance SF-424M – Mandatory
2.	Project/Performance Site Location(s) SF-P/PSL
3.	Budget Information – SF-424A Non-Construction Programs
4.	Assurances – SF-424B Mandatory Non-Construction Programs
5.	Letter from the Authorized Representative (Transmittal Letter)

6.	Table of Contents
7.	State Plan Abstract
8.	State Plan/Program Narrative
9.	Budget Narrative/Justification
10.	Appendices
11.	Certification Regarding Lobbying
12.	Protection of Human Subjects Assurance Identification/IRB
13.	SF-LLL – Disclosure of Lobbying Activities, if applicable

FY 2022 and FY 2023 applicants are to submit all documents in the order listed in the checklist.

B. Request an Exemption from Required Electronic Submission

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

Additionally, on a case-by-case basis, we will consider requests to accept hard-copy, paper submissions of state and tribal plans and reporting forms when circumstances such as natural disasters (floods, hurricanes, etc.), or widespread disruptions of mail service occur, or in other rare cases that would prevent electronic submission of the documents.

Recipients will be required to submit a written statement to ACF that the recipient qualifies for an exemption under one of these grounds: lack of internet access, limited computer capacity that prevents the uploading of large files to the internet, occurrence of natural disasters (floods, hurricanes, etc.), widespread disruptions of mail service, or other rare cases that would prevent electronic submission of the documents.

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

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

C. Formatting Requirements for Paper Format Applications Only

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

- The Project Description (Section IV. E.) must not exceed 65 pages.
- Tables and/or Charts are permitted throughout the application.
- Clearly number all pages (including forms, project description, and appendices) in one serial number set, handwritten if necessary.
- Include a table of contents.
- Submit an original and one copy.
- Submit all documents in the order listed in the Application for Funding and State Application Checklist.
- Mail application to the Program Office contact listed in this announcement.

D. Forms, Assurances, and Certifications

Applicants seeking financial assistance under this announcement must submit the listed Standard Forms (SFs), assurances, and certifications. All required Standard Forms, assurances, and certifications are available at the [Grants.gov Forms Repository](http://www.grants.gov/forms).

Forms/Certifications	Description	Where Found
SF-424M (Mandatory Form)	This is a required Standard Form. Application for Federal Assistance - Mandatory	Available at http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html .
Certification Regarding Lobbying (Grants.gov Lobbying Form)	Required of all applicants at the time of their application. If not available at the time of the application, it must be submitted prior to the award of the grant.	Available at http://www.grants.gov/web/grants/forms/sf-424-family.html .
SF-LLL - Disclosure of Lobbying Activities	If any funds have been paid, or will be paid, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an	"Disclosure Form to Report Lobbying" is available at http://www.grants.gov/web/grants/forms/sf-424-family.html .

Forms/Certifications	Description	Where Found
	<p>officer or employee of Congress, or an employee of a Member of Congress in connection with this commitment providing for the United States to insure or guarantee a loan, the applicant shall complete and submit the SF-LLL, "Disclosure Form to Report Lobbying," in accordance with its instructions. Applicants must furnish an executed copy of the Certification Regarding Lobbying prior to award.</p>	
<p>SF-Project/Performance Site</p> <p>Location(s) (SF-P/PSL)</p>	<p>Referenced in <i>Section IV Application and Submission Information</i></p>	<p>Form is available at http://www.grants.gov/web/grants/forms/sf-424-family.html.</p>
<p>Protection of Human Subjects Assurance Identification/IRB Certification/ Declaration of Exemption (Common Rule)</p>	<p>Submission of the required information and forms is due with the application package by the date</p>	<p>Form is available at http://www.hhs.gov/ohrp/assurances/forms/index.html.</p> <p>General information about HHS Protection of Human Subjects regulations can be obtained at http://www.hhs.gov/ohrp/. Applicants may also contact OHRP by email (ohrp@csophs.dhhs.gov.)</p>
<p>Letter from the Authorized Representative (Transmittal Letter)</p>	<p>The transmittal letter signed by the Authorized Representative must include the Code of Federal Domestic Assistance (CFDA) Number 93.235 and "State Sexual Risk Avoidance Education" as the program to which the application is responding. The letter should also include documentation or a citation of the authority of</p>	<p>Must be submitted with the application package by the due date found on the cover page of this announcement.</p>

Forms/Certifications	Description	Where Found
	the authorized representative to apply for and administer funds on behalf of the state. The transmittal letter should be included with all copies of the application. If states are proposing a local evaluation, the letter should also identify the type or method of evaluation that is proposed.	
Budget Information – Non-Construction Programs – SF-424A		http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html .
Assurances for Non – Construction Programs (SF-424B Mandatory)		http://www.grants.gov/web/grants/forms/sf-424-mandatory-family.html .

E. The Project Description

The project description provides the majority of information by which the state plan addresses the activity for which federal funds are being requested and should be consistent with the goals and objectives of the program as described in *Section I. Program Description*. Supporting documents should be included to provide clear and succinct details on planned program activities.

Project Abstract

States will include an abstract of no more than 600 words of the post-award state plan. The abstract will provide an overview of the plan and will form the basis for the application summary in grants management documents. The abstract may also be distributed to provide information to the public and Congress and represents a high-level summary of the project. As a result, applicants must prepare a clear, accurate, concise abstract that can be understood without reference to other parts of the state plan and that provides a description of the proposed project, including the following: brief statement of the project; whether it is a local, county-wide, or state-wide project; mechanism for delivering services (e.g., sub-awards to local organizations through a competitive bid process); geographic area to be served (urban, rural, suburban); description of target population and number of youths to be served; a short description of the intervention to be implemented; overarching goal(s); any evaluation plans; and monitoring

strategies. States should include the following information on the first page of the project abstract (this information is not included in the 600-word maximum).

Include the following information in the abstract:

Contact and Grant Request Information

State:

Fiscal Year:

Grant allocation amount:

	Prefix	First and Last Name	Suffix	Title	Telephone	Email Address
Contact Person						
Project Director						
Authorized Representative						

Description of Problem and Need

This section requires the applicant to establish a simple needs assessment of problems related to non-marital sexual activity and other risky behaviors as identified in the Title V SRAE legislation. The state must clearly identify the physical, economic, social, financial, institutional, and/or other problem(s) requiring a solution. The need for assistance, including the nature and scope of the problem, must be demonstrated, and the principal and subordinate objectives of the project must be clearly and concisely stated. Any relevant data based on planning studies should be included or referred to in the endnotes/footnotes. Incorporate demographic data and participant/beneficiary information, as well as data describing the needs of the target population and the proposed service area. The discussion may also include brief descriptions of existing programs and/or gaps therein to address the problem. However, the applicant should avoid detailed descriptions of these programs. The goal is not to describe all programs and activities in the state, but rather to demonstrate that the applicant has assessed how best to use the available grant funds.

Goal(s)

As outlined in the *Section I. C., Program Description, Title V State Sexual Risk Avoidance Education (SRAE) Program Overview, Goals(s) and Logic Models*, describe the goal(s) and outcomes of all planned activities. FYSB encourages the use of logic models and the inclusion in the proposal of any logic models that have been developed that support the implementation plan.

Logic Model

Applicants are encouraged to submit a logic model for designing and managing their project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links between program elements. While there are many versions of logic models, for the purposes of this announcement the logic model should summarize the following:

- Goals of the project (e.g., objectives, reasons for proposing the interventions, if applicable);
- Assumptions (e.g., beliefs about how the program will work and its supporting resources. Assumptions should be based on research, best practices, and experience);
- Inputs (e.g., organizational profile, collaborative partners, key staff, budget);
- Target population (e.g., the individuals to be served);
- Activities (e.g., approach, listing key interventions, if applicable);
- Outputs (i.e., the direct products or deliverables of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

Implementation Plan

The Implementation Plan is a critical part of the Program Narrative and, therefore, of the state plan. The program model should incorporate an evidence-based or evidence-informed approach that has demonstrated impacts on youth refraining from sexual activity. These selected interventions must have evidence of effectiveness with target populations and address each topic outlined in *Section I.C., Program Description, Title V State Sexual Risk Avoidance Education (SRAE) Program Overview, Evidence-Informed Interventions and Strategies*.

States must demonstrate in their state plan an implementation plan based on the problem and need for reaching the proposed target population(s). They should also develop and identify goals, activities, mechanisms, and a short set of broad steps that will be used to implement the activities. For each step, include the responsible party, the expected outputs, and the start and end dates.

States should involve service recipients in this process and describe how they were involved. Also, they should describe how the state proposes to involve service recipients in the actual implementation of the proposed plan.

A state's plan should include any potential barriers to the implementation plan and how the state proposes to overcome those barriers.

If the state plans to develop formal partnerships, describe the mechanisms that will be used and the types of services the partners will provide. Formal partners are those with whom the state will establish legal agreements such as grants, contracts, interagency agreements, memoranda of agreement, or memoranda of understanding. States should also include a plan for monitoring the effective management and coordination of activities with subrecipients, partners, and other

stakeholders to ensure program integrity to the proposed plan and the priorities of the state and of ACF.

Description of Programmatic Assurances

Educational materials used by awardees and subrecipients must be reviewed for medical accuracy. Education must be based on adolescent learning and developmental theories for the age group receiving the education and be culturally appropriate, recognizing the experiences of youth from diverse communities and backgrounds.

For each of the requirements related to legislative priorities, states must describe measures (i.e., contract language, report requirements, and site visits) that the state will use to ensure compliance.

States will be required to take appropriate action to correct any inaccurate information discovered by ACF during the state plan review process or at any time during the grant project period(s).

Ensuring the Well-Being of Vulnerable Children and Families

States should describe a plan for incorporating a positive youth development approach, including targeting risk and protective factors in young people's lives that are known to influence sexual activity, and address the trauma needs of vulnerable youth.

Elements of Equity:

Describe how the project will recruit and retain historically underrepresented and underserved populations within the targeted community. The applicant must describe how they will coordinate, communicate, and engage with community-based organizations whose mission is to reach underrepresented and underserved populations. Applicants must describe staff development and training opportunities to increase knowledge of gender, race, and equity.

Target Population

State plans must identify how they will target SRAE to youth ages 10 to 19. The plan must include a description of the proposed target groups in detail and demonstrate how and why they were chosen. In cases where groups have equal needs, the state may describe how infrastructure, systems, local support, feasibility, and service recipient participation were considered in identifying target populations.

Health Care and Other Service Referrals

State plans should describe youth and family service referrals to other providers of health care services (e.g., substance abuse, including alcohol). The description should identify referral resources, include information about how referrals will be made to other services and programs, and how follow up and tracking will take place to ensure linkage to identified services. Referral

resources should include, but not be limited to, substance use and abuse and mental health services. Referrals cannot be made to family planning organizations that provide abortions.

Local Evaluation

States may use up to 20 percent of their allotment to build the evidence-base for SRAE by conducting or supporting a local evaluation. *See Section I.C., Program Description, Title V State Sexual Risk Avoidance Education (SRAE) Program Overview, Local Evaluation* for details on funding allotment requirements for evaluation.

States that plan to conduct a local evaluation must describe a brief plan to implement the evaluation. The plan should include the proposed research questions, the planned rigorous evaluation design, how an independent evaluator will be procured (including the types of experience of the independent evaluator), and the proposed evaluation infrastructure. Plans should be clearly described with an understanding that modifications may be required after an evaluator is officially hired and/or federal government-sponsored TA is provided. *See Section I.C., Program Description, Title V State Sexual Risk Avoidance Education (SRAE) Program Overview, Local Evaluation* to assist with the development of the evaluation plan.

Performance Measurement

ACF plans to use OMB-approved performance measure data to monitor the extent to which the programs are being implemented according to the SRAE legislation. Recipients applying for funds must indicate their agreement to collect information related to the performance measures and report the data to ACF. ACF will only collect data that have received OMB approval under PRA from recipients. Recipients are encouraged to develop additional indicators of program performance for their internal data collection needs, as desired. *See Section I. Program Description, Performance Measurement.*

Objective Performance Measures

Describe at least two program-related, objective outcome measures that the state proposes to use to measure its success in reaching key goals. Outcome measures are those designed to measure behaviors, attitudes, knowledge, beliefs, attendance, reach, and dosage of service recipients served. The outcome measures must take into consideration how education on SRAE is a means of preventing teen pregnancy, STIs and other risky behavior. SRAE primarily teaches the benefits associated with delaying sexual activity until marriage, personal responsibility, self-regulation, goal setting, healthy decision-making, healthy relationships, avoiding poverty, resisting sexual coercion, dating violence, and other youth risk behaviors such as drug and alcohol usage.

States may develop additional performance measures, including both outcome and output measures. Output measures are those designed to measure the success of the program staff in implementing activities, such as the number of program recipients or communities served.

National Evaluation:

Applicants must clearly state their assurance/agreement that the state and subrecipient will participate, if selected for national evaluation(s). Plans must discuss the recipients' willingness to participate, if selected, and authorized representatives must affirm this understanding in their plan.

Sustainability Plan

States are encouraged to develop a sustainability plan that includes their subrecipient and collaborating partners. The plan should detail how the proposed project activities will continue after federal funding ends. States should have their funded providers develop and plan to sustain key elements of their grant-supported projects (e.g., strategies or services and interventions that have been effective in improving practices and outcomes for youth and families).

Service Recipient Involvement

Briefly describe how the state proposes to make the plan public within the state, after its transmittal to ACF, in such a manner as to facilitate comment from the public (including service recipients and any federal or other public agency). For example, the state may post the proposed plan on the web, hold listening sessions or town hall meetings, establish or continue an advisory board for the program, or send the plan to interested groups.

Budget Information – Non-Construction Projects – SF-424A

States will submit one budget information form with this application, which will be reviewed in light of their proposed activities for the budget period. For section B of the Budget Information Form (SF-424A), applicants must submit a *detailed* budget justification for each line item within the object class categories (6a-j) on a supplemental sheet(s) of paper. The budget justification should include detailed sub-categories of section 6a-j. The budget narrative must thoroughly describe how the proposed categorical costs are derived. For in-kind contributions, the source of the contribution and how the valuation of that contribution was determined must also be described.

Whether direct or indirect, all costs must be allowable, allocable, reasonable, and necessary under the new applicable uniform administrative requirements, cost principles, and audit requirements for HHS awards. Awards issued under this announcement are subject to 45 CFR Part 75 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards. The Code of Federal Regulations is available at www.gpo.gov. Any fees as program income must be used toward the goals and objectives of the project. The budget narrative must also include a breakdown of the allocation of federal funding. For further information on Budget guidance, see *Appendix C*.

Complete sections A (Budget Summary) through F (Other Budget Information) of the SF-424A. The SF-424A is available at the: [Grants.gov Forms Repository web site](#).

F. Paperwork Reduction Disclaimer

As required by the Paperwork Reduction Act, 44 U.S.C. §3501-3521, the public reporting burden for the Application, State Plan, and Performance Progress Report is estimated to average 60 hours per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. The Application, State Plan, and Performance Progress Report are approved under OMB Control Number 0970-0551, which expires on 08/31/2023. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

G. Funding Restrictions

Special Note: *The Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2021 and Consolidated Appropriations Act, 2021, (Division H, Title II, Sec. 202), limits the salary amount that may be awarded and charged to ACF grants and cooperative agreements. Award funds issued under this funding opportunity may not be used to pay the salary of an individual at a rate in excess of Executive Level II. For the Executive Level II salary, please see "Executive & Senior Level Employee Pay Tables" under <https://www.opm.gov/policy-data-oversight/pay-leave/salaries-wages/>. The Executive Level II salary reflects an individual's base salary exclusive of fringe benefits and any income that an individual may be permitted to earn outside of the duties of the applicant organization. This salary limitation also applies to sub-awards and subcontracts under an ACF grant or cooperative agreement.*

V. AWARD ADMINISTRATION INFORMATION

A. Administrative and National Policy Requirements

For the terms and conditions that apply to all mandatory grants, as well as ACF program-specific terms and conditions, go to: <https://www.acf.hhs.gov/grants/mandatory-formula-block-and-entitlement-grants>. The recipient must comply with 45 CFR Part 87 “Equal Treatment for Faith-Based Organizations,” including the requirement that all faith-based or religious organizations are eligible, on the same basis as any other organization, to participate in this and any program for which they are otherwise eligible. Thus, when selecting service providers or subrecipients, it may not discriminate for or against any organization on the basis of the organization's religious character or affiliation as indicated in 45 CFR § 87.3(a).

A faith-based organization that participates in this program will retain its independence from the Government and may continue to carry out its mission consistent with religious freedom, non-discrimination, and conscience protections in Federal law, including the Free Speech and Free Exercise Clauses of the First Amendment of the U.S. Constitution, the Religious Freedom Restoration Act (42 U.S.C. § 2000bb et seq.), the Coats-Snowe Amendment (42 U.S.C. § 238n), Title VII of the Civil Rights Act of 1964 (42 U.S.C. § 2000e–1(a) and § 2000e–2(e)), the Americans with Disabilities Act, 42 U.S.C. § 12113(d)(2), section 1553 of the Patient Protection and Affordable Care Act (42 U.S.C. § 18113), the Weldon Amendment (e.g., Further Consolidated Appropriations Act, 2020, Public Law 116–94, 133 Stat. 2534, 2607, div. A, sec.

507(d) (Dec. 20, 2019)), or any related or similar federal laws or regulations. Religious accommodations may also be sought under many of these religious freedom and conscience protection laws.

Consistent with 45 CFR § 87.3(b), a faith-based organization may not use direct financial assistance from the Department to engage in any explicitly religious activities (including activities that involve overt religious content such as worship, religious instruction, or proselytization). Consistent with 45 CFR § 87.3(d), Such an organization also may not, in providing services funded by the Department, discriminate against a program beneficiary or prospective program beneficiary on the basis of religion, a religious belief, a refusal to hold a religious belief, or a refusal to attend or participate in a religious practice.

An application funded with the release of federal funds through a grant award does not constitute or imply compliance with federal regulations. Funded organizations are responsible for ensuring that their activities comply with all applicable federal regulations. SRA grants are subject to requirements at Sections 503 (relating to payment), 507 (relating to criminal penalties for false statements), and 508 (relating to nondiscrimination) of the Social Security Act (42 U.S.C. §703, 707, & 708).

B. Reporting

Recipients are required to submit post-award performance progress reports and financial reports. Program reporting forms for mandatory grant programs must be submitted electronically through the OLDC at: <https://home.grantsolutions.gov/home/>.

Please see *Section IV. Application and Submission Information* for more information on required electronic submission, as well as exemption from this requirement.

Financial reporting forms must be submitted electronically to the Division of Payment Management through the Payment Management System. Paper copies will not be accepted.

C. Performance Progress Reports (PPR)

State SRAE recipients will be required to submit progress reports semi-annually. Reports will be due 30 days after the conclusion of the reporting period. Recipients **must** submit their reports online through the OLDC at: <https://home.grantsolutions.gov/home/>.

Failure to submit reports on time may be a basis for withholding grant funds, suspension, or termination of the grant. In addition, all funds reported after the obligation period will be recouped.

PPR requirements are approved under OMB control number 0970-0551, which expires 08/31/2023.

D. Federal Financial Reports (FFR)

Recipients must submit FFR for each grant award using the Standard Form 425 (SF-425). The following table lists the due dates for the first and final FFR for FY 2022 and FY 2023 grant awards.

Fiscal Year	Project and Expenditure Period	Report Period End Date	FFR Due Date First Report	FFR Due Date Final Report
FY 2022	10/01/2021-09/30/2023	09/30/2023	12/30/2022	12/30/2023
FY 2023	10/01/2023-09/30/2025	09/30/2025	12/30/2024	12/30/2025

In addition, a separate, quarterly financial report must be submitted electronically to the Division of Payment Management using the SF-425.

E. FFATA Sub-award and Executive Compensation

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

F. Property Reporting

ACF has implemented the use of the SF-428 *Tangible Property Report* and the SF-429 *Real Property Status Report* for all recipients. Both standard forms are available at: <https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortby=1>.

VI. AGENCY CONTACT

Program Office Contact

MeGan Hill
U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Family and Youth Services Bureau
330 C Street, SW
Washington, DC 20201
Tel: (202) 205-9605
E-mail: megan.hill@acf.hhs.gov

Grants Management Contact

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APPENDICES

APPENDIX A – ESTIMATED ALLOTMENTS FOR FY 2022 and FY 2023

**APPENDIX B – RESOURCES FOR DEVELOPING PROGRAMS AND LOGIC
MODELS**

APPENDIX C – BUDGET GUIDANCE

APPENDIX A – ALLOTMENTS FOR FY 2022 & FY 2023**

States/Territories	Allocation
ALABAMA	1,106,113
ALASKA	110,998
ARIZONA	1,493,750
ARKANSAS	733,405
CALIFORNIA	6,603,273
COLORADO	655,715
CONNECTICUT	490,233
DELAWARE	156,305
DISTRICT OF COLUMBIA	115,889
FLORIDA	3,571,021
GEORGIA	2,234,657
HAWAII	176,567
IDAHO	281,782
ILLINOIS	2,112,966
INDIANA	1,117,314
IOWA	445,608
KANSAS	489,560
KENTUCKY	1,027,265
LOUISIANA	1,398,220
MAINE	158,576
MARYLAND	760,253
MASSACHUSETTS	747,977
MICHIGAN	1,796,709
MINNESOTA	692,524
MISSISSIPPI	931,783
MISSOURI	1,110,587
MONTANA	159,264
NEBRASKA	247,385
NEVADA	556,349
NEW HAMPSHIRE	85,274
NEW JERSEY	1,140,292
NEW MEXICO	561,729
NEW YORK	3,446,426
NORTH CAROLINA	2,131,867
NORTH DAKOTA	86,310
OHIO	2,257,475
OKLAHOMA	902,626
ORGEON	534,252
PENNSYLVANIA	2,106,075
RHODE ISLAND	135,637

SOUTH CAROLINA	1,040,059
SOUTH DAKOTA	152,179
TENNESSEE	1,408,307
TEXAS	6,784,115
UTAH	442,775
VERMONT	54,818
VIRGINIA	1,186,214
WASHINGTON	951,672
WEST VIRGINIA	338,862
WISCONSIN	811,647
WYOMING	73,065
AMERICAN SAMOA	73,036
FEDERATED STATES of MICRONESIA	47,492
GUAM	80,296
MARSHALL ISLANDS	13,501
NORTHERN MARIANA ISLANDS	45,119
PALAU	21,000
PUERTO RICO	1,565,963
VIRGIN ISLANDS	39,869
Total Allocation	60,000,000

**Note: The NOFO will be updated with FY 2023 allocations.

APPENDIX B – RESOURCES FOR DEVELOPING PROGRAMS AND LOGIC MODELS

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

Another helpful resource is the CDC webpage devoted to Program Evaluation at the [Office of the Associate Director for Program - Program Evaluation](http://www.cdc.gov/eval/resources/) (see <http://www.cdc.gov/eval/resources/>). This federal website offers links to many online resources focused on logic model development including templates and sample documents.

These resources are intended to be used as a guide for developing logic models. The specific program examples within are not meant to be examples that meet the criteria for this FOA.

Logic Model Format

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

APPENDIX C- BUDGET GUIDANCE

Program Application Budget Related Documents

SF-424A Form Budget Information – Non-Construction Programs

Budget and Budget Narrative Documents

1. **Budget** – This should be in a spreadsheet or table format. Both the federal and non-federal budget items should be clearly marked. The budget should reflect the budget cost categories outlined in SF-424A (i.e., personnel, benefits, travel expenses, equipment, supplies, contractual, other, indirect costs, matching and in-kind contributions) and identify all line items within each category. Programs should provide a specific itemization of the budget.

2. **Budget Narrative** – The programs should provide a justification supporting the need to allocate funds for items in the spreadsheet or table format of the itemized budget. The justification should provide a clear description of how the budget items directly relate to the completion of project activities. In the contractual category, indicate if the sub-award was awarded competitively or non-competitively. If the sub-award is a sole-source/non-competitive award, provide a brief explanation of the rationale for the selection of the subrecipient(s).

Budget Categories

The components of the budget and budget narrative are the line-item categories and the type of funding (federal and non-federal share), as indicated below:

- 1) Personnel – Salaries of staff performing tasks directly related to the project.
- 2) Fringe Benefits – The amount paid by an employer to cover non-wage benefits. This includes (but is not limited to) health insurance, disability insurance, retirement, pensions, life insurance, and dental insurance.
- 3) Travel – Lodging, transportation, and per diem costs for out-of-town meetings and conferences for salaried personnel only (not consultants or contractors).
- 4) Equipment – Tangible, nonexpendable personal property having a useful life of more than one year and an acquisition cost of \$5,000 or more per unit.
- 5) Supplies – All personal property excluding equipment, such as office supplies.
- 6) Contractual – Costs of subcontracts for services and goods except for trainer and consultant costs, which should be indicated in the “Other” category. Sub-awards are contracts, as they require another entity to provide services to meet the scope of work as indicated in the FOA.
- 7) Other – Such costs, where applicable and appropriate, may include, but are not limited to, insurance, food, professional services costs (consultants), space and equipment rentals, printing and publication, computer use, training costs, tuition and stipends, staff development costs, furniture, fuel, program supplies, local travel, accounting, evaluation, and administrative costs.
- 8) Total Direct Charges – The costs that can be specifically identified with a particular project, program, or activity.

- 9) Indirect Costs – Costs that are incurred for common or joint objectives and, therefore, cannot be identified readily and specifically with a particular sponsored project, program, or activity, but are necessary to the operations of the organization. For example, the costs of operating and maintaining facilities, administrative salaries, etc. An Indirect Cost Rate Agreement provided by a federal government agency establishes the percentage of the organization's total costs to its direct cost base.

Indirect Cost Rate Agreement

Website of contacts for assistance in obtaining an indirect cost rate agreement:

<http://rates.psc.gov/fms/dca/map1.html>.