

116TH CONGRESS 1ST SESSION

S. 1530

To authorize the Secretary of Health and Human Services to award grants to support the access of marginalized youth to sexual health services, and for other purposes.

IN THE SENATE OF THE UNITED STATES

May 16, 2019

Ms. Hirono (for herself, Mr. Booker, Mr. Blumenthal, Mr. Markey, Mr. Brown, Ms. Warren, Mrs. Gillibrand, and Mr. Murphy) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To authorize the Secretary of Health and Human Services to award grants to support the access of marginalized youth to sexual health services, and for other purposes.

- 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 "Youth Access to Sexual
- 5 Health Services Act of 2019".

1	SEC. 2. AUTHORIZATION OF GRANTS TO SUPPORT THE AC-
2	CESS OF MARGINALIZED YOUTH TO SEXUAL
3	HEALTH SERVICES.
4	(a) Grants.—The Secretary of Health and Human
5	Services may award grants on a competitive basis to eligi-
6	ble entities to support the access of marginalized youth
7	to sexual health services.
8	(b) USE OF FUNDS.—An eligible entity that is award-
9	ed a grant under subsection (a) may use the funds to—
10	(1) provide medically accurate and complete
11	age, developmentally, and culturally appropriate sex-
12	ual health information to marginalized youth, includ-
13	ing information on how to access sexual health serv-
14	ices;
15	(2) promote effective communication regarding
16	sexual health among marginalized youth;
17	(3) promote and support better health, edu-
18	cation, and economic opportunities for school-age
19	parents; and
20	(4) train individuals who work with
21	marginalized youth to promote—
22	(A) the prevention of unintended preg-
23	nancy;
24	(B) the prevention of sexually transmitted
25	infections, including the human immuno-
26	deficiency virus (HIV);

1	(C) healthy relationships; and
2	(D) the development of safe and supportive
3	environments.
4	(c) APPLICATION.—To be awarded a grant under
5	subsection (a), an eligible entity shall submit an applica-
6	tion to the Secretary at such time, in such manner, and
7	containing such information as the Secretary may require.
8	(d) Priority.—In awarding grants under subsection
9	(a), the Secretary shall give priority to eligible entities—
10	(1) with a history of supporting the access of
11	marginalized youth to sexuality education or sexual
12	health services; and
13	(2) that plan to serve marginalized youth that
14	are not served by other programs in existence on the
15	day before the date of enactment of this Act, for
16	adolescents regarding HIV, other sexually trans-
17	mitted infections, or pregnancy prevention.
18	(e) Requirements.—The Secretary may not award
19	a grant under subsection (a) to an eligible entity unless—
20	(1) such eligible entity has formed a partner-
21	ship with a community organization; and
22	(2) such eligible entity agrees—
23	(A) to employ a scientifically effective
24	strategy;

1	(B) that all information provided to
2	marginalized youth will be—
3	(i) age and developmentally appro-
4	priate;
5	(ii) medically accurate and complete;
6	(iii) scientifically based; and
7	(iv) provided in the language and cul-
8	tural context that is most appropriate for
9	the individuals served by the eligible entity;
10	and
11	(C) that for each year the eligible entity
12	receives grant funds under subsection (a), the
13	eligible entity will submit to the Secretary an
14	annual report that includes—
15	(i) the use of grant funds by the eligi-
16	ble entity;
17	(ii) how the use of grant funds has in-
18	creased the access of marginalized youth to
19	sexual health services; and
20	(iii) such other information as the
21	Secretary may require.
22	(f) Publication and Evaluations.—
23	(1) Evaluations.—Not less than once every 2
24	years after the date of the enactment of this Act. the

1	Secretary shall evaluate the effectiveness of which-
2	ever of the following is greater:
3	(A) Eight grants awarded under subsection
4	(a).
5	(B) Ten percent of the grants awarded
6	under subsection (a).
7	(2) Publication.—The Secretary shall make
8	available to the public—
9	(A) the evaluations required under para-
10	graph (1); and
11	(B) the reports required under subsection
12	(e)(2)(C).
13	(g) Limitations.—No funds made available to an el-
14	igible entity under this section may be used by such entity
15	to provide access to sexual health services that—
16	(1) withhold sexual health-promoting or life-sav-
17	ing information;
18	(2) are medically inaccurate or have been sci-
19	entifically shown to be ineffective;
20	(3) promote gender stereotypes;
21	(4) are insensitive or unresponsive to the needs
22	of young people, including—
23	(A) youth with varying gender identities,
24	gender expressions, and sexual orientations;
25	(B) sexually active youth;

1	(C) pregnant or parenting youth;
2	(D) survivors of sexual abuse or assault;
3	and
4	(E) youth of all physical, developmental,
5	and mental abilities; or
6	(5) are inconsistent with the ethical imperatives
7	of medicine and public health.
8	(h) Transfer of Funds.—Any unobligated balance
9	of funds made available under section 510(d) of the Social
10	Security Act (42 U.S.C. 710(d)) (as in effect on the day
11	before the date of the enactment of this Act) are hereby
12	transferred and made available to the Secretary to carry
13	out this Act. The amounts transferred and made available
14	to carry out this Act shall remain available until expended.
15	(i) Definitions.—In this section:
16	(1) COMMUNITY ORGANIZATION.—The term
17	"community organization" includes a State or local
18	health or education agency, public school, youth-fo-
19	cused organization that is faith-based and commu-
20	nity-based, juvenile justice entity, or other organiza-
21	tion that provides confidential and appropriate sexu-
22	ality education or sexual health services to
23	marginalized youth.
24	(2) ELIGIBLE ENTITY.—The term "eligible enti-
25	ty" includes a State or local health or education

- agency, public school, nonprofit organization, hospital, or an Indian tribe or tribal organization (as such terms are defined in section 4 of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 5304)).
 - (3) Marginalized Youth.—The term "marginalized youth" means a person under the age of 26 that is disadvantaged by underlying structural barriers and social inequity.
 - (4) Medically accurate and complete.—
 The term "medically accurate and complete", when used with respect to information, means information that—
 - (A) is supported by research and recognized as accurate, objective, and complete by leading medical, psychological, psychiatric, or public health organizations and agencies; and
 - (B) does not withhold any information relating to the effectiveness and benefits of correct and consistent use of condoms or other contraceptives and pregnancy prevention methods.
 - (5) Scientifically effective strategy.—
 The term "scientifically effective strategy" means a strategy that—

1	(A) is widely recognized by leading medical
2	and public health agencies as effective in pro-
3	moting sexual health awareness and healthy be-
4	havior; and
5	(B) either—
6	(i) has been demonstrated to be effec-
7	tive on the basis of rigorous scientific re-
8	search; or
9	(ii) incorporates characteristics of ef-
10	fective programs.
11	(6) Secretary.—The term "Secretary" means
12	the Secretary of Health and Human Services.
13	(7) SEXUAL HEALTH SERVICES.—The term
14	"sexual health services" includes—
15	(A) sexual health information, education,
16	and counseling;
17	(B) contraception;
18	(C) emergency contraception;
19	(D) condoms and other barrier methods to
20	prevent pregnancy or sexually transmitted in-
21	fections;
22	(E) routine gynecological care, including
23	human papillomavirus (HPV) vaccines and can-
24	cer screenings;

1	(F) pre-exposure prophylaxis or post-expo-
2	sure prophylaxis;
3	(G) mental health services;
4	(H) sexual assault survivor services; and
5	(I) other prevention, care, or treatment
6	services

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