



(Original Signature of Member)

117TH CONGRESS  
1ST SESSION

**H. R.** \_\_\_\_\_

To provide for the overall health and well-being of young people, including the promotion and attainment of lifelong sexual health and healthy relationships, and for other purposes.

\_\_\_\_\_  
IN THE HOUSE OF REPRESENTATIVES

Ms. LEE of California introduced the following bill; which was referred to the Committee on \_\_\_\_\_

\_\_\_\_\_  
**A BILL**

To provide for the overall health and well-being of young people, including the promotion and attainment of lifelong sexual health and healthy relationships, 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 “Real Education and  
5 Access for Healthy Youth Act of 2021”.

1 **SEC. 2. PURPOSE AND FINDINGS.**

2 (a) PURPOSE.—The purpose of this Act is to provide  
3 young people with sex education and sexual health services  
4 that—

5 (1) promote and uphold the rights of young  
6 people to information and services that empower  
7 them to make decisions about their bodies, health,  
8 sexuality, families, and communities in all areas of  
9 life;

10 (2) are evidence-informed, comprehensive in  
11 scope, confidential, equitable, accessible, medically  
12 accurate and complete, age and developmentally ap-  
13 propriate, culturally responsive, and trauma-in-  
14 formed and resilience-oriented;

15 (3) provide information about the prevention,  
16 treatment, and care of pregnancy, sexually trans-  
17 mitted infections, and interpersonal violence;

18 (4) provide information about the importance of  
19 consent as a basis for healthy relationships and for  
20 autonomy in healthcare;

21 (5) provide information on gender roles and  
22 gender discrimination;

23 (6) provide information on the historical and  
24 current condition in which education and health sys-  
25 tems, policies, programs, services, and practices have  
26 uniquely and adversely impacted Black, Indigenous,

1 Latinx, Asian, Asian American and Pacific Islander,  
2 and other People of Color; and

3 (7) redress inequities in the delivery of sex edu-  
4 cation and sexual health services to marginalized  
5 young people.

6 (b) FINDINGS.—Congress finds the following:

7 (1) Young people need and have the right to sex  
8 education and sexual health services that are evi-  
9 dence-informed, comprehensive in scope, confiden-  
10 tial, equitable, accessible, medically accurate and  
11 complete, age and developmentally appropriate, cul-  
12 turally responsive, and trauma-informed and resil-  
13 ience-oriented.

14 (2) Currently, there is a gap between the sex  
15 education that young people should be receiving  
16 based on expert standards and the sex education  
17 many actually receive.

18 (3) Only 29 States and the District of Colum-  
19 bia mandate sex education in schools.

20 (4) When there is sex education or instruction  
21 regarding human immunodeficiency virus (HIV) or  
22 sexually transmitted infections (STI), 15 States do  
23 not require the content to be evidence-informed,  
24 medically accurate and complete, age and develop-  
25 mentally appropriate, or culturally responsive.

1           (5) Many sex education programs and sexual  
2 health services currently available were not designed  
3 to and do not currently meet the needs of  
4 marginalized young people. Some such programs and  
5 services actually harm marginalized young people.

6           (6) For marginalized young people, a lack of  
7 comprehensive in scope, confidential, equitable, and  
8 accessible sex education and sexual health services is  
9 not unfamiliar, but rather a longstanding manifesta-  
10 tion of white supremacy, which has touched every  
11 aspect of our history, culture, and institutions, in-  
12 cluding the education and healthcare systems.

13           (7) The development and delivery of sexual  
14 health education and services in the United States  
15 historically has been rooted in the oppression of  
16 Black, Indigenous, Latinx, Asian, Asian American  
17 and Pacific Islander, and other People of Color.

18           (8) The United States has a long history of eu-  
19 genics and forced sterilization. The sexual and re-  
20 productive rights and bodily autonomy of specific  
21 communities deemed “undesirable” or “defective”  
22 were targeted by our governments resulting in state-  
23 sanctioned violence and generations of trauma and  
24 oppression. These communities include—

25                   (A) people with low incomes;

1 (B) immigrants;

2 (C) people with disabilities;

3 (D) people living with HIV;

4 (E) survivors of interpersonal violence;

5 (F) people who are incarcerated, detained,

6 or who otherwise have encountered the crimi-

7 nal-legal system;

8 (G) Black, Indigenous, and other People of

9 Color;

10 (H) people who are lesbian, gay, bisexual,

11 transgender, and queer; and

12 (I) young people who are pregnant and

13 parenting.

14 (9) Black young people are more likely to re-

15 ceive abstinence-only instruction. Research shows

16 that abstinence-only instruction, also known as “sex-

17 ual risk avoidance” instruction, is ineffective in com-

18 parison to sex education.

19 (10) Black, Indigenous, and Latinx young peo-

20 ple are disproportionately more likely to be diag-

21 nosed with an STI, have an unintended pregnancy,

22 or experience sexual assault.

23 (11) The framework of Reproductive Justice ac-

24 knowledges and aims to address the legacy of white

25 supremacy, systemic oppression, and the restrictions

1 on sex education and sexual health services that dis-  
2 proportionately impact marginalized communities.  
3 Reproductive Justice will be achieved when all people  
4 regardless of actual or perceived race, color, eth-  
5 nicity, national origin, religion, immigration status,  
6 sex (including gender identity and sexual orienta-  
7 tion), disability status, pregnancy or parenting sta-  
8 tus, or age have the power to make decisions about  
9 their bodies, health, sexuality, families, and commu-  
10 nities in all areas of life.

11 (12) Increased resources are required for sex  
12 education and sexual health services to reach all  
13 young people, redress inequities and their impacts  
14 on marginalized young people, and achieve Repro-  
15 ductive Justice for young people.

16 (13) Such sex education and sexual health serv-  
17 ices should—

18 (A) promote and uphold the rights of  
19 young people to information and services in  
20 order to make and exercise informed and re-  
21 sponsible decisions about their sexual health;

22 (B) be evidence-informed, comprehensive in  
23 scope, confidential, equitable, accessible, age  
24 and developmentally appropriate, culturally re-

1 spondive, and trauma-informed and resilience-  
2 oriented;

3 (C) include instruction and materials that  
4 address—

5 (i) puberty and adolescent develop-  
6 ment;

7 (ii) sexual and reproductive anatomy  
8 and physiology;

9 (iii) sexual orientation, gender iden-  
10 tity, and gender expression;

11 (iv) contraception, pregnancy, and re-  
12 production;

13 (v) HIV and other STIs;

14 (vi) consent and healthy relationships;

15 and

16 (vii) interpersonal violence;

17 (D) promote gender equity and be inclusive  
18 of young people with varying gender identities,  
19 gender expressions, and sexual orientations;

20 (E) promote safe and healthy relationships;

21 and

22 (F) promote racial equity and be respon-  
23 sive to the needs of young people who are  
24 Black, Indigenous, and other People of Color.

1 **SEC. 3. DEFINITIONS.**

2 In this Act:

3 (1) AGE AND DEVELOPMENTALLY APPRO-  
4 PRIATE.—The term “age and developmentally appro-  
5 priate” means topics, messages, and teaching meth-  
6 ods suitable to particular ages, age groups, or devel-  
7 opmental levels, based on cognitive, emotional, so-  
8 cial, and behavioral capacity of most young people at  
9 that age level.

10 (2) CHARACTERISTICS OF EFFECTIVE PRO-  
11 GRAMS.—The term “characteristics of effective pro-  
12 grams” means the aspects of evidence-informed pro-  
13 grams, including development, content, and imple-  
14 mentation of such programs, that—

15 (A) have been shown to be effective in  
16 terms of increasing knowledge, clarifying values  
17 and attitudes, increasing skills, and impacting  
18 behavior; and

19 (B) are widely recognized by leading med-  
20 ical and public health agencies to be effective in  
21 changing sexual behaviors that lead to sexually  
22 transmitted infections, unintended pregnancy,  
23 and interpersonal violence among young people.

24 (3) CONSENT.—The term “consent” means af-  
25 firmative, conscious, and voluntary agreement to en-  
26 gage in interpersonal, physical, or sexual activity.



1           (4) CULTURALLY RESPONSIVE.—The term “cul-  
2           turally responsive” means education and services  
3           that—

4                   (A) embrace and actively engage and ad-  
5                   just to young people and their various cultural  
6                   identities;

7                   (B) recognize the ways in which many  
8                   marginalized young people face unique barriers  
9                   in our society that result in increased adverse  
10                  health outcomes and associated stereotypes; and

11                  (C) may address the ways in which racism  
12                  has shaped national health care policy, the last-  
13                  ing historical trauma associated with reproduc-  
14                  tive health experiments and forced sterilizations  
15                  of Black, Latinx, and Indigenous communities,  
16                  or sexual stereotypes assigned to young People  
17                  of Color or LGBTQ+ people.

18           (5) EVIDENCE-INFORMED.—The term “evi-  
19           dence-informed” means incorporates characteristics,  
20           content, or skills that have been proven to be effec-  
21           tive through evaluation in changing sexual behavior.

22           (6) GENDER EXPRESSION.—The term “gender  
23           expression” means the expression of one’s gender,  
24           such as through behavior, clothing, haircut, or voice,  
25           and which may or may not conform to socially de-

1        fined behaviors and characteristics typically associ-  
2        ated with being either masculine or feminine.

3            (7) GENDER IDENTITY.—The term “gender  
4        identity” means the gender-related identity, appear-  
5        ance, mannerisms, or other gender-related character-  
6        istics of an individual, regardless of the individual’s  
7        designated sex at birth.

8            (8) INCLUSIVE.—The term “inclusive” means  
9        content and skills that ensure marginalized young  
10       people are valued, respected, centered, and sup-  
11       ported in sex education instruction and materials.

12           (9) INSTITUTION OF HIGHER EDUCATION.—The  
13       term “institution of higher education” has the  
14       meaning given the term in section 101 of the Higher  
15       Education Act of 1965 (20 U.S.C. 1001).

16           (10) INTERPERSONAL VIOLENCE.—The term  
17       “interpersonal violence” means abuse, assault, bul-  
18       lying, dating violence, domestic violence, harassment,  
19       intimate partner violence, or stalking.

20           (11) MARGINALIZED YOUNG PEOPLE.—The  
21       term “marginalized young people” means young peo-  
22       ple who are disadvantaged by underlying structural  
23       barriers and social inequities, including young people  
24       who are—

- 1 (A) Black, Indigenous, and other People of  
2 Color;  
3 (B) immigrants.  
4 (C) in contact with the foster care system;  
5 (D) in contact with the juvenile justice sys-  
6 tem;  
7 (E) experiencing homelessness;  
8 (F) pregnant or parenting;  
9 (G) lesbian, gay, bisexual, transgender, or  
10 queer;  
11 (H) living with HIV;  
12 (I) living with disabilities;  
13 (J) from families with low-incomes; or  
14 (K) living in rural areas.

15 (12) MEDICALLY ACCURATE AND COMPLETE.—

16 The term “medically accurate and complete” means  
17 that—

- 18 (A) the information provided through the  
19 education is verified or supported by the weight  
20 of research conducted in compliance with ac-  
21 cepted scientific methods and is published in  
22 peer-reviewed journals, where applicable; or  
23 (B) the education contains information  
24 that leading professional organizations and

1 agencies with relevant expertise in the field rec-  
2 ognize as accurate, objective, and complete.

3 (13) RESILIENCE.—The term “resilience”  
4 means the ability to adapt to trauma and tragedy.

5 (14) SECRETARY.—The term “Secretary”  
6 means the Secretary of Health and Human Services.

7 (15) SEX EDUCATION.—The term “sex edu-  
8 cation” means high quality teaching and learning  
9 that—

10 (A) is delivered, to the maximum extent  
11 practicable, following the National Sexuality  
12 Education Standards of the Future of Sex Ed  
13 Initiative;

14 (B) is about a broad variety of topics re-  
15 lated to sex and sexuality, including—

16 (i) puberty and adolescent develop-  
17 ment;

18 (ii) sexual and reproductive anatomy  
19 and physiology;

20 (iii) sexual orientation, gender iden-  
21 tity, and gender expression;

22 (iv) contraception, pregnancy, and re-  
23 production;

24 (v) HIV and other STIs;

1 (vi) consent and healthy relationships;

2 and

3 (vii) interpersonal violence;

4 (C) explores values and beliefs about such  
5 topics; and

6 (D) helps young people in gaining the  
7 skills that are needed to navigate relationships  
8 and manage one's own sexual health.

9 (16) SEXUAL DEVELOPMENT.—The term “sex-  
10 ual development” means the lifelong process of phys-  
11 ical, behavioral, cognitive, and emotional growth and  
12 change as it relates to an individual's sexuality and  
13 sexual maturation, including puberty, identity devel-  
14 opment, socio-cultural influences, and sexual behav-  
15 iors.

16 (17) SEXUAL HEALTH SERVICES.—The term  
17 “sexual health services” includes—

18 (A) sexual health information, education,  
19 and counseling;

20 (B) all methods of contraception approved  
21 by the Food and Drug Administration;

22 (C) routine gynecological care, including  
23 human papillomavirus (HPV) vaccines and can-  
24 cer screenings;

1 (D) pre-exposure prophylaxis or post-expo-  
2 sure prophylaxis;

3 (E) substance use and mental health serv-  
4 ices;

5 (F) interpersonal violence survivor services;  
6 and

7 (G) other prevention, care, or treatment  
8 services.

9 (18) SEXUAL ORIENTATION.—The term “sexual  
10 orientation” means an individual’s romantic, emo-  
11 tional, or sexual attraction to other people.

12 (19) TRAUMA.—The term “trauma” means a  
13 response to an event, series of events, or set of cir-  
14 cumstances that is experienced or witnessed by an  
15 individual or group of people as physically or emo-  
16 tionally harmful or life-threatening with lasting ad-  
17 verse effects on their functioning and mental, phys-  
18 ical, social, emotional, or spiritual well-being.

19 (20) TRAUMA-INFORMED AND RESILIENCE-ORI-  
20 ENTED.—The term “trauma-informed and resil-  
21 ience-oriented” means an approach that realizes the  
22 prevalence of trauma, recognizes the various ways  
23 individuals, organizations, and communities may re-  
24 spond to trauma differently, recognizes that resil-

1       ience can be built, and responds by putting this  
2       knowledge into practice.

3           (21) YOUNG PEOPLE.—The term “young peo-  
4       ple” means individuals who are ages 10 through 29  
5       at the time of commencement of participation in a  
6       project supported under this Act.

7           (22) YOUTH-FRIENDLY SEXUAL HEALTH SERV-  
8       ICES.—The term “youth-friendly sexual health serv-  
9       ices” means sexual health services that are provided  
10      in a confidential, equitable, and accessible manner  
11      that makes it easy and comfortable for young people  
12      to seek out and receive services.

13 **SEC. 4. GRANTS FOR SEX EDUCATION AT ELEMENTARY**  
14                           **AND SECONDARY SCHOOLS AND YOUTH-**  
15                           **SERVING ORGANIZATIONS.**

16       (a) PROGRAM AUTHORIZED.—The Secretary, in co-  
17      ordination with the Secretary of Education, shall award  
18      grants, on a competitive basis, to eligible entities to enable  
19      such eligible entities to carry out projects that provide  
20      young people with sex education.

21       (b) DURATION.—Grants awarded under this section  
22      shall be for a period of 5 years.

23       (c) ELIGIBLE ENTITY.—In this section, the term “el-  
24      igible entity” means a public or private entity that delivers  
25      health education to young people.

1 (d) APPLICATIONS.—An eligible entity desiring a  
2 grant under this section shall submit an application to the  
3 Secretary at such time, in such manner, and containing  
4 such information as the Secretary may require.

5 (e) PRIORITY.—In awarding grants under this sec-  
6 tion, the Secretary shall give priority to eligible entities  
7 that are—

8 (1) State educational agencies or local edu-  
9 cational agencies; or

10 (2) Indian Tribes or Tribal organizations, as  
11 defined in section 4 of the Indian Self-Determination  
12 and Education Assistance Act (25 U.S.C. 5304).

13 (f) USE OF FUNDS.—Each eligible entity that re-  
14 ceives a grant under this section shall use the grant funds  
15 to carry out a project that provides young people with sex  
16 education.

17 **SEC. 5. GRANTS FOR SEX EDUCATION AT INSTITUTIONS OF**  
18 **HIGHER EDUCATION.**

19 (a) PROGRAM AUTHORIZED.—The Secretary, in co-  
20 ordination with the Secretary of Education, shall award  
21 grants, on a competitive basis, to institutions of higher  
22 education or consortia of such institutions to enable such  
23 institutions to provide students with age and develop-  
24 mentally appropriate sex education.



1 (b) DURATION.—Grants awarded under this section  
2 shall be for a period of 5 years.

3 (c) APPLICATIONS.—An institution of higher edu-  
4 cation or consortium of such institutions desiring a grant  
5 under this section shall submit an application to the Sec-  
6 retary at such time, in such manner, and containing such  
7 information as the Secretary may require.

8 (d) PRIORITY.—In awarding grants under this sec-  
9 tion, the Secretary shall give priority to an institution of  
10 higher education that—

11 (1) has an enrollment of needy students, as de-  
12 fined in section 318(b) of the Higher Education Act  
13 of 1965 (20 U.S.C. 1059e(b));

14 (2) is a Hispanic-serving institution, as defined  
15 in section 502(a) of such Act (20 U.S.C. 1101a(a));

16 (3) is a Tribal College or University, as defined  
17 in section 316(b) of such Act (20 U.S.C. 1059c(b));

18 (4) is an Alaska Native-serving institution, as  
19 defined in section 317(b) of such Act (20 U.S.C.  
20 1059d(b));

21 (5) is a Native Hawaiian-serving institution, as  
22 defined in section 317(b) of such Act (20 U.S.C.  
23 1059d(b));

1           (6) is a Predominantly Black Institution, as de-  
2           fined in section 318(b) of such Act (20 U.S.C.  
3           1059e(b));

4           (7) is a Native American-serving, nontribal in-  
5           stitution, as defined in section 319(b) of such Act  
6           (20 U.S.C. 1059f(b));

7           (8) is an Asian American and Native American  
8           Pacific Islander-serving institution, as defined in  
9           section 320(b) of such Act (20 U.S.C. 1059g(b)); or

10          (9) is a minority institution, as defined in sec-  
11          tion 365 of such Act (20 U.S.C. 1067k), with an en-  
12          rollment of needy students, as defined in section 312  
13          of such Act (20 U.S.C. 1058).

14          (e) USES OF FUNDS.—An institution of higher edu-  
15          cation or consortium of such institutions receiving a grant  
16          under this section shall use grant funds to develop and  
17          implement a project to integrate sex education into the  
18          institution of higher education in order to reach a large  
19          number of students, by carrying out 1 or more of the fol-  
20          lowing activities:

21                (1) Adopting and incorporating age and devel-  
22                opmentally appropriate sex education into student  
23                orientation, general education, or courses.

24                (2) Developing or adopting and implementing  
25                educational programming outside of class that deliv-

1       ers age and developmentally appropriate sex edu-  
2       cation to students.

3           (3) Developing or adopting and implementing  
4       innovative technology-based approaches to deliver  
5       age and developmentally appropriate sex education  
6       to students.

7           (4) Developing or adopting and implementing  
8       peer-led activities to generate discussion, educate,  
9       and raise awareness among students about age and  
10      developmentally appropriate sex education.

11          (5) Developing or adopting and implementing  
12      policies and practices to link students to sexual  
13      health services.

14   **SEC. 6. GRANTS FOR EDUCATOR TRAINING.**

15      (a) PROGRAM AUTHORIZED.—The Secretary, in co-  
16      ordination with the Secretary of Education, shall award  
17      grants, on a competitive basis, to eligible entities to enable  
18      such eligible entities to carry out the activities described  
19      in subsection (e).

20      (b) DURATION.—Grants awarded under this section  
21      shall be for a period of 5 years.

22      (c) ELIGIBLE ENTITY.—In this section, the term “el-  
23      igible entity” means—

24          (1) a State educational agency or local edu-  
25      cational agency;

1           (2) an Indian Tribe or Tribal organization, as  
2 defined in section 4 of the Indian Self-Determination  
3 and Education Assistance Act (25 U.S.C. 5304);

4           (3) a State or local department of health;

5           (4) an educational service agency;

6           (5) a nonprofit institution of higher education  
7 or a consortium of such institutions; or

8           (6) a national or statewide nonprofit organiza-  
9 tion or consortium of nonprofit organizations that  
10 has as its primary purpose the improvement of pro-  
11 vision of sex education through training and effec-  
12 tive teaching of sex education.

13       (d) APPLICATION.—An eligible entity desiring a  
14 grant under this section shall submit an application to the  
15 Secretary at such time, in such manner, and containing  
16 such information as the Secretary may require.

17       (e) AUTHORIZED ACTIVITIES.—

18           (1) REQUIRED ACTIVITY.—Each eligible entity  
19 receiving a grant under this section shall use grant  
20 funds for professional development and training of  
21 relevant teachers, health educators, faculty, adminis-  
22 trators, and staff, in order to increase effective  
23 teaching of sex education to young people.

1           (2) PERMISSIBLE ACTIVITIES.—Each eligible  
2           entity receiving a grant under this section may use  
3           grant funds to—

4                   (A) provide training and support for edu-  
5                   cators about the content, skills, and profes-  
6                   sional disposition needed to implement sex edu-  
7                   cation effectively;

8                   (B) develop and provide training and sup-  
9                   port to educators on incorporating anti-racist  
10                  and gender inclusive policies and practices in  
11                  sex education;

12                  (C) support the dissemination of informa-  
13                  tion on effective practices and research findings  
14                  concerning the teaching of sex education;

15                  (D) support research on—

16                           (i) effective sex education teaching  
17                           practices; and

18                           (ii) the development of assessment in-  
19                           struments and strategies to document—

20                                   (I) young people’s understanding  
21                                   of sex education; and

22                                   (II) the effects of sex education;

23                  (E) convene conferences on sex education,  
24                  in order to effectively train educators in the  
25                  provision of sex education; and

1 (F) develop and disseminate appropriate  
2 research-based materials to foster sex edu-  
3 cation.

4 (3) SUBGRANTS.—Each eligible entity receiving  
5 a grant under this section may award subgrants to  
6 nonprofit organizations that possess a demonstrated  
7 record of providing training to teachers, health edu-  
8 cators, faculty, administrators, and staff on sex edu-  
9 cation to—

10 (A) train educators in sex education;

11 (B) support internet or distance learning  
12 related to sex education;

13 (C) promote rigorous academic standards  
14 and assessment techniques to guide and meas-  
15 ure student performance in sex education;

16 (D) encourage replication of best practices  
17 and model programs to promote sex education;

18 (E) develop and disseminate effective, re-  
19 search-based sex education learning materials;  
20 or

21 (F) develop academic courses on the peda-  
22 gogy of sex education at institutions of higher  
23 education.

1 **SEC. 7. AUTHORIZATION OF GRANTS TO SUPPORT THE DE-**  
2 **LIVERY OF SEXUAL HEALTH SERVICES TO**  
3 **MARGINALIZED YOUNG PEOPLE.**

4 (a) PROGRAM AUTHORIZED.—The Secretary shall  
5 award grants, on a competitive basis, to eligible entities  
6 to enable such entities to provide youth-friendly sexual  
7 health services to marginalized young people.

8 (b) DURATION.—Grants awarded under this section  
9 shall be for a period of 5 years.

10 (c) ELIGIBLE ENTITY.—In this section, the term “el-  
11 igible entity” means—

12 (1) a public or private youth-serving organiza-  
13 tion; or

14 (2) a covered entity, as defined in section 340B  
15 of the Public Health Service Act (42 U.S.C. 256b).

16 (d) APPLICATIONS.—An eligible entity desiring a  
17 grant under this section shall submit an application to the  
18 Secretary at such time, in such manner, and containing  
19 such information as the Secretary may require.

20 (e) USES OF FUNDS.—Each eligible entity that re-  
21 ceives a grant under this section may use the grant funds  
22 to—

23 (1) develop and implement an evidence-in-  
24 formed project to deliver sexual health services to  
25 marginalized young people;

1           (2) establish, alter, or modify staff positions,  
2           service delivery policies and practices, service deliv-  
3           ery locations, service delivery environments, service  
4           delivery schedules, or other services components in  
5           order to increase youth-friendly sexual health serv-  
6           ices to marginalized young people;

7           (3) conduct outreach to marginalized young  
8           people to invite them to participate in the eligible  
9           entity's sexual health services and to provide feed-  
10          back to inform improvements in the delivery of such  
11          services;

12          (4) establish and refine systems of referral to  
13          connect marginalized young people to other sexual  
14          health services and supportive services;

15          (5) establish partnerships and collaborations  
16          with entities providing services to marginalized  
17          young people to link such young people to sexual  
18          health services, such as by delivering health services  
19          at locations where they congregate, providing trans-  
20          portation to locations where sexual health services  
21          are provided, or other linkages to services ap-  
22          proaches;

23          (6) provide evidence-informed, comprehensive in  
24          scope, confidential, equitable, accessible, medically  
25          accurate and complete, age and developmentally ap-



1       appropriate, culturally responsive, and trauma-in-  
2       formed and resilience-oriented sexual health infor-  
3       mation to marginalized young people in the lan-  
4       guages and cultural contexts that are most appro-  
5       priate for the marginalized young people to be  
6       served by the eligible entity;

7               (7) promote effective communication regarding  
8       sexual health among marginalized young people; and

9               (8) provide training and support for eligible en-  
10      tity personnel and community members who work  
11      with marginalized young people about the content,  
12      skills, and professional disposition needed to provide  
13      youth-friendly sex education and youth-friendly sex-  
14      ual health services.

15 **SEC. 8. REPORTING AND IMPACT EVALUATION.**

16       (a) **GRANTEE REPORT TO SECRETARY.**—For each  
17      year an eligible entity receives grant funds under section  
18      4, 5, 6, or 7, the eligible entity shall submit to the Sec-  
19      retary a report that includes—

20               (1) the use of grant funds by the eligible entity;

21               (2) how the use of grant funds has increased  
22      the access of young people to sex education or sexual  
23      health services; and

24               (3) such other information as the Secretary  
25      may require.

1           (b) SECRETARY'S REPORT TO CONGRESS.—Not later  
2 than 1 year after the date of the enactment of this Act,  
3 and annually thereafter for a period of 5 years, the Sec-  
4 retary shall prepare and submit to Congress a report on  
5 the activities funded under this Act. The Secretary's re-  
6 port to Congress shall include—

7           (1) a statement of how grants awarded by the  
8 Secretary meet the purposes described in section  
9 2(a); and

10           (2) information about—

11           (A) the number of eligible entities that are  
12 receiving grant funds under sections 4, 5, 6,  
13 and 7;

14           (B) the specific activities supported by  
15 grant funds awarded under sections 4, 5, 6, and  
16 7;

17           (C) the number of young people served by  
18 projects funded under sections 4, 5, and 7, in  
19 the aggregate and disaggregated and cross-tab-  
20 ulated by grant program, race and ethnicity,  
21 sex, sexual orientation, gender identity, and  
22 other characteristics determined by the Sec-  
23 retary (except that such disaggregation or  
24 cross-tabulation shall not be required in a case  
25 in which the results would reveal personally

1 identifiable information about an individual  
2 young person);

3 (D) the number of teachers, health edu-  
4 cators, faculty, school administrators, and staff  
5 trained under section 6; and

6 (E) the status of the evaluation required  
7 under subsection (c).

8 (c) MULTI-YEAR EVALUATION.—

9 (1) IN GENERAL.—Not later than 6 months  
10 after the date of the enactment of this Act, the Sec-  
11 retary shall enter into a contract with a nonprofit  
12 organization with experience in conducting impact  
13 evaluations to conduct a multi-year evaluation on the  
14 impact of the projects funded under sections 4, 5, 6,  
15 and 7 and to report to Congress and the Secretary  
16 on the findings of such evaluation.

17 (2) EVALUATION.—The evaluation conducted  
18 under this subsection shall—

19 (A) be conducted in a manner consistent  
20 with relevant, nationally recognized professional  
21 and technical evaluation standards;

22 (B) use sound statistical methods and  
23 techniques relating to the behavioral sciences,  
24 including quasi-experimental designs, inferential

1 statistics, and other methodologies and tech-  
2 niques that allow for conclusions to be reached;

3 (C) be carried out by an independent orga-  
4 nization that has not received a grant under  
5 section 4, 5, 6, or 7; and

6 (D) be designed to provide information on  
7 output measures and outcome measures to be  
8 determined by the Secretary.

9 (3) REPORT.—Not later than 6 years after the  
10 date of enactment of this Act, the organization con-  
11 ducting the evaluation under this subsection shall  
12 prepare and submit to the appropriate committees of  
13 Congress and the Secretary an evaluation report.  
14 Such report shall be made publicly available, includ-  
15 ing on the website of the Department of Health and  
16 Human Services.

17 **SEC. 9. NONDISCRIMINATION.**

18 Activities funded under this Act shall not discrimi-  
19 nate on the basis of actual or perceived sex (including sex-  
20 ual orientation and gender identity), age, parental status,  
21 race, color, ethnicity, national origin, disability, or reli-  
22 gion. Nothing in this Act shall be construed to invalidate  
23 or limit rights, remedies, procedures, or legal standards  
24 available under any other Federal law or any law of a  
25 State or a political subdivision of a State, including the

1 Civil Rights Act of 1964 (42 U.S.C. 2000a et seq.), title  
2 IX of the Education Amendments of 1972 (20 U.S.C.  
3 1681 et seq.), section 504 of the Rehabilitation Act of  
4 1973 (29 U.S.C. 794), the Americans with Disabilities Act  
5 of 1990 (42 U.S.C. 12101 et seq.), and section 1557 of  
6 the Patient Protection and Affordable Care Act (42  
7 U.S.C. 18116).

8 **SEC. 10. LIMITATION.**

9 No Federal funds provided under this Act may be  
10 used for sex education or sexual health services that—

11 (1) withhold health-promoting or life-saving in-  
12 formation about sexuality-related topics, including  
13 HIV;

14 (2) are medically inaccurate or incomplete;

15 (3) promote gender or racial stereotypes or are  
16 unresponsive to gender or racial inequities;

17 (4) fail to address the needs of sexually active  
18 young people;

19 (5) fail to address the needs of pregnant or par-  
20 enting young people;

21 (6) fail to address the needs of survivors of  
22 interpersonal violence;

23 (7) fail to address the needs of young people of  
24 all physical, developmental, or mental abilities;

1           (8) fail to be inclusive of individuals with vary-  
2           ing gender identities, gender expressions, and sexual  
3           orientations; or

4           (9) are inconsistent with the ethical imperatives  
5           of medicine and public health.

6 **SEC. 11. AMENDMENTS TO OTHER LAWS.**

7           (a) AMENDMENT TO THE PUBLIC HEALTH SERVICE  
8 ACT.—Section 2500 of the Public Health Service Act (42  
9 U.S.C. 300ee) is amended by striking subsections (b)  
10 through (d) and inserting the following:

11           “(b) CONTENTS OF PROGRAMS.—All programs of  
12 education and information receiving funds under this sub-  
13 chapter shall include information about the potential ef-  
14 fects of intravenous substance use.”.

15           (b) AMENDMENTS TO THE ELEMENTARY AND SEC-  
16 ONDARY EDUCATION ACT OF 1965.—Section 8526 of the  
17 Elementary and Secondary Education Act of 1965 (20  
18 U.S.C. 7906) is amended—

19           (1) by striking paragraphs (3), (5), and (6);

20           (2) in paragraph (2), by inserting “or” after  
21           the semicolon;

22           (3) by redesignating paragraph (4) as para-  
23           graph (3); and

1           (4) in paragraph (3), as redesignated by para-  
2           graph (3), by striking the semicolon and inserting a  
3           period.

4 **SEC. 12. FUNDING.**

5           (a) **AUTHORIZATION.**—For the purpose of carrying  
6 out this Act, there is authorized to be appropriated  
7 \$100,000,000 for each of fiscal years 2022 through 2027.  
8 Amounts appropriated under this subsection shall remain  
9 available until expended.

10          (b) **RESERVATIONS OF FUNDS.**—

11           (1) **IN GENERAL.**—The Secretary—

12                   (A) shall reserve not more than 30 percent  
13 of the amount authorized under subsection (a)  
14 for the purposes of awarding grants for sex  
15 education at elementary and secondary schools  
16 and youth-serving organizations under section  
17 4;

18                   (B) shall reserve not more than 10 percent  
19 of the amount authorized under subsection (a)  
20 for the purpose of awarding grants for sex edu-  
21 cation at institutions of higher education under  
22 section 5;

23                   (C) shall reserve not more than 15 percent  
24 of the amount authorized under subsection (a)

1 for the purpose of awarding grants for educator  
2 training under section 6;

3 (D) shall reserve not more than 30 percent  
4 of the amount authorized under subsection (a)  
5 for the purpose of awarding grants for sexual  
6 health services for marginalized youth under  
7 section 7; and

8 (E) shall reserve not less than 5 percent of  
9 the amount authorized under subsection (a) for  
10 the purpose of carrying out the reporting and  
11 impact evaluation required under section 8.

12 (2) RESEARCH, TRAINING AND TECHNICAL AS-  
13 SISTANCE.—The Secretary shall reserve not less  
14 than 10 percent of the amount authorized under  
15 subsection (a) for expenditures by the Secretary to  
16 provide, directly or through a competitive grant  
17 process, research, training, and technical assistance,  
18 including dissemination of research and information  
19 regarding effective and promising practices, pro-  
20 viding consultation and resources, and developing re-  
21 sources and materials to support the activities of re-  
22 cipients of grants. In carrying out such functions,  
23 the Secretary shall collaborate with a variety of enti-  
24 ties that have expertise in sex education and sexual



1 health services standards setting, design, develop-  
2 ment, delivery, research, monitoring, and evaluation.

3 (c) REPROGRAMMING OF ABSTINENCE ONLY UNTIL  
4 MARRIAGE PROGRAM FUNDING.—The unobligated bal-  
5 ance of funds made available to carry out section 510 of  
6 the Social Security Act (42 U.S.C. 710) (as in effect on  
7 the day before the date of enactment of this Act) are here-  
8 by transferred and shall be used by the Secretary to carry  
9 out this Act. The amounts transferred and made available  
10 to carry out this Act shall remain available until expended.

11 (d) REPEAL OF ABSTINENCE ONLY UNTIL MAR-  
12 RIAGE PROGRAM.—Section 510 of the Social Security Act  
13 (42 U.S.C. 710 et seq.) is repealed.