Parental Responsibility Campaign

THE WHITE HOUSE

WASHINGTON

March 2, 1994

MEMORANDUM FOR BILL GALSTON

FROM: PAUL DIMOND

SUBJECT: AN OPPORTUNITY AND RESPONSIBILITY CAMPAIGN

President's Campaign for Young People (or Presidential Young People's Campaign)
- **against the Poverty of Teen Pregnancy and Out-of-Wedlock Childbirth**
- **for the Rewards of Learning, Earning and Work, and Family**

Message: What you will earn as an adult depends on two key factors. First, what you learn -- now and throughout the rest of your life -- and put to use wherever you choose to work and to live provides the pathway for you to make a good life for you and a better life for your children. Second, when, with whom and under what circumstances, you choose to bear or beget children will affect whether you place major hurdles or gain additional support and momentum along the way. Put simply, early childbearing or begetting children out-of-wedlock will make it much harder for you to get ahead:[straight statistics]. In contrast, choosing to defer pregnancy and child-bearing until you have completed high school, are married and have the mutual support of an in-tact family will make it much easier for you and your children to move ahead:[straight statistics].

The President's new compact with young people is simple: If you will accept responsibility for your own learning and your choice to defer begetting or bearing children until both parents are able to join in the nurture and support of their offspring, then we will empower you with opportunity to learn to high standards, to move from high school to work or college, and to continue to navigate through networks of upward mobility of work and lifelong learning to support yourself and your family. And when you are starting out on this journey of work, lifelong learning, and family careers as a young adult, we will make work and learning pay for you and your family: EITC, health care, child care, School-to-work or Pell Grants or Income Contingent Loan for all.

But, if you are an adolescent or young man and choose to beget a child out-of wedlock, know this: you will no longer be able to escape your responsibility to support your offspring; paternity will be established in every case, and the father must work to pay a minimum support obligation of $250/month per child until the child reaches age 18 (which amount a court of local jurisdiction may raise as your income rises). If you are an adolescent or young woman, know this: you will no longer be able to rely on welfare as a way of surviving in a life of poverty for you and your offspring; you will have one, and only one,

second chance to learn and earn for up two years, and you will work for wages to support yourself and your child thereafter. There will be no increase in benefits for bearing a second child; and, if you are a minor, you may not have a separate household but must make progress in school and live with your parent or guardian.

If you take responsibility for working hard, playing by the rules, and seizing the opportunities of this new compact, then the many and great rewards of learning, earning and upward mobility, and family will be yours.

Structure

- Young People's Goals 2000 (Legislation; or Presidential Conference with Selected Leaders including Young Persons, perhaps or National Service Corporation with Selected Leaders; or campaign launched by the President near in time, but independent of Welfare Reform legislation...see discussion of Process below)
  - --early adolescence(11-13) -- improved learning (Goals 2000), reduced sexual activity (school, near school,community information and counselling for real Public Health issues of STD's, Low Interbirth Intervals, reproductive health, and pitch on Mutual Respect;)
  - --adolescence(14-17) -- improved learning (Goals 2000), reduced pregnancy (Public Health as above, plus AIDS; Avoiding Sentence to Poverty for Self and Children and Preserving Opportunity for Rewards of Learning, Earning and Work, and Family)
  - --young adulthood(18-21) --improved learning, school-to-work or college, ending discrimination/isolation from jobs, promoting jobs, reduce pregnancy and out-of-wedlock child-bearing, absolute parental responsibility (mandatory paternity and support for fathers), promote marriage [Bill, we have Lang's "I have a Dream" guarantee of college or school-to-work for every young person who plays by the rules]
  - --adult(21-25) -- improved lifelong learning and work opportunities for all persons, ending discrimination/isolation and promoting job networks(One Stops)
- National Mobilization for Young People
  - -- Administration Campaign -- VP, Tipper, FLOTUS?, Community Enterprise Board?
    - Adolescent and Young Men: R. Brown, Cisneros, Espy, Perry, Riley, L.Brown, Bowles, Days, Patrick
    - Adolescent and Young Women -- Shalala, O'Leary, Reno, Elders, Browner
  - -- Challenge Grants for Community-based Organizations
    - -combination grants from Education, National Service, Surgeon General, Justice, HHS, Commerce?
    - -focus on community, school, church-based counselling, family planning, opportunity and responsibility, Mentoring and

Networks to Opportunity
-- Citizens Campaign -- Co-Chairs, Marian Wright Edelman, Jesse Jackson (include young people from National Service or from college mentors of middle and high school students; or separate Young People's Campaign)

Process. Bill, it seems to me that the key here is to combine the substance of our opportunity agenda with the self-interested responsibility theme in the same campaign. If we are now at a stage to set these basic rules by which all are expected to play, then we could initiate the campaign and encourage a great deal of local innovation and private participation -- without convening a Presidential Summit or running the gauntlet of proposed legislation in Congress.

Or do you think there is still so much noise on these issues that it is better to try and build a consensus through some process like the Goals 2000 Bush-Clinton Governor's Education Summit? If so, I am not sure that the Governors are the right (or sole) participants because they don't have the same direct responsibility under State Constitutions for the broader range of issues here as they do with Public Schooling -- unless we want to make schools the primary, if not sole focus of the campaign. For example, Mayors, Church leaders, and Community-based Organizations, and certain public and Congressional Caucus interest groups might arguably have as much of a stake as the Governors. But once you start down this path, where do you draw the line as to the proper universe of interests, and who does the line-drawing? Do you have any thoughts on this?

I also fear that proposing something to Congress by way of legislation may be the wrong way to go. I am not sure that adding such a campaign or Goals Panel provision as a part of Welfare Reform legislation makes sense: although childcare for working families who are poor may be the most important element of any reform bill, I am not sure that the legislative process will allow us to send (or to control) the message we want going out to the country; nor am I convinced that including such a campaign, goals or goals panel in the bill will tactically aid us in the Welfare Reform debate. But I am more than happy to defer to savier heads than mine (like yours, Bruce, and Gene) on this.

For your information, the anniversary of Martin Luther King's Assassination is coming up in early April if we want to use that as a time to convene a group or to commence a campaign.

cc Bonnie Deane, Sheryll Cashin, Bruce Reed, Mike Schmidt, Gene Sperling

March 16, 1994

DRAFT

MEMORANDUM FOR WELFARE REFORM WORKING GROUP

FROM: PAUL DIMOND
PETER EDELMAN
BILL GALSTON
MIKE SMITH
GENE SPERLING

SUBJECT: PARENTAL RESPONSIBILITY -- PUTTING CHILDREN FIRST
Campaign for Youth Opportunity and Responsibility or Campaign against Teen Pregnancy

INTRODUCTION

One of the most important goals of welfare reform is to reduce the flow of new applicants onto the welfare rolls. Since 1989, the rate of new welfare applicants has increased so substantially that the total welfare caseload has swelled 25% -- from 4,000,000 to 5,000,000 caseheads. This increase in new applicants is due almost entirely to children born to never-married mothers of all races who are abandoned by the fathers and who do not support their offspring, not to divorce, separation or death of a parent.

A recent Annie Casey Foundation ~~study~~ statistical Report placed the resulting tragedy for these children in a larger perspective:

- Less than 8% of the children of young persons who defer child-bearing until they have graduated from high school, are twenty years old, and married will live in poverty.

- Almost 80% of the children of young persons who have a child before they graduate from high school, ~~before being married,~~ outside of marriage and while a teenager will live in poverty.

This holds true across racial lines. A minority family headed by a married couple averages three times the household income of a household headed by a single white mother.

Neither AFDC nor the combination of other transfer payments to poor families even promises to lift the children of a single parent family out of poverty: in fact, in 1992 adjusted dollars, the average monthly payment to an AFDC mother has dropped from $800 in 1970 to close to $400 in 1994. In contrast, a household headed by a couple that works at the

minimum wage for a combined 60 hours per week will earn **four times** as much, almost $1600 per month, including EITC; equally important, this working couple will have the mutual support to share responsibility for nurturing their children and climbing career and learning ladders over time to higher skills and earnings for themselves and their children.

The simple truth is that children who make babies will have a very difficult getting themselves or their offspring out of poverty, while children who learn, graduate from high school, and defer child-bearing until married and able to support their offspring will get ahead. The difference in lifechances could not be more stark.

The responsibility to the offspring is even clearer: both parents who bring a child into the world bear responsibility for providing nurture and support. Children who make babies act irresponsibly because they cannot meet this fundamental obligation. This is a basic issue of character for every person responsible for bearing a child, as well as of basic support for the baby.

If we are going to reform welfare and put children first, we therefore must find a way to prevent pregnancy by young parents who cannot support their offspring. This proposal seeks to offer effective ways to do so by building on the efforts of the Welfare Reform Working Group to date.

Our proposal is divided into five parts:

- themes
- goals
- general opportunity and responsibility components
- components targeted to at-risk youth
- structure of national mobilization and nature of presidential leadership

1. **Themes**. Two alternative themes proceed along the following line:

- A Campaign to Prevent Teen Pregnancy -- This campaign would focus on the responsibility of all teenagers to avoid making babies because of the poverty such early childbearing will cause to themselves and their babies.

- A Campaign of Youth Opportunity and Responsibility -- This campaign would be broadened to help all youth understand the rewards of staying in school, learning, and deferring child-bearing until married and both parents are able to support and nurture themselves and their offspring.

The narrower theme has the advantage of focussing specifically on a key behavior at the core of any successful welfare reform -- confronting the irresponsibility and harm of children making babies. The broader theme includes this concern, but offers the potential for a larger,

and perhaps more effective, affirmative message to youth: if you want to succeed in life for yourself and for your children, take responsibility for seizing the opportunity to learn now, to graduate from high school, to enter college or the labor market, to defer child-bearing until you are married and both parents can work together as a family to achieve a better life for themselves and their children.

We recommend the broader theme for three reasons. First, it better fits the rich message of economic opportunity and personal responsibility that the President is shaping for youth, for voters, and for the country -- as exemplified, for example, in the President's discussion with the students at Kramer Junior High School. Second, we believe that it has the potential to be more effective in reducing teen pregnancy because it will enable us to discuss the nature and scope of the increased opportunities that the Clinton Administration is offering to get ahead, as well as the nature of the severely reduced lifechances resulting from teen pregnancy. Third, it will enable us to tie together -- in a coherent and compelling way -- a number of related "prevention" or "responsibility" programs (e.g., relating to drugs, violence, crime) and "opportunity" initiatives (e.g., Goals 2000; Safe Schools and Safe Streets; School-to-Work; Pell Grants, work-study, and income contingent loans; Youth Employment, Fair Chance, and Build; Community Empowerment; Reemployment Act; and National Service).

2. **Goals**. The goals for youth in this campaign could be stated as follows:

- Graduate from high school
- Defer making babies until at least age twenty, graduated from high school, in the work force, and married
- Seize the post-secondary opportunities to go on to college or from school-to-work and to continue to learn for life
- If you do father a child at whatever age, take responsibility for the support and nurture of the child along with the mother

In addition, Bill Galston believes that we should add a fifth goal: children and young adolescents (up to age 14 or 15) should avoid sexual intercourse, period. As a corollary performance benchmark, each personal goal could also be stated as a percentage goal based on a relevant measure (e.g., as in Goals 2000, 90% high school graduation rate).

3. **General Opportunity and Responsibility Components**. General components applicable to **all** youth could include:

a. Responsibility -- e.g.,

- No separate household for minor mothers.
- Minor mothers must stay in school.
- [Family Cap].
- No dead-beat dads. [E.g., Mandatory paternity and minimum support for

non-custodial parents; state option to enforce support through mandatory work programs for non-custodial parents; stricter collection and enforcement of support throughout minority of offspring, including scheduled payment of arrearages, wage garnishment, etc.].

b. Opportunity -- e.g.,

- Regardless of personal or family wealth, learning in middle school will qualify all students who achieve to go on to a college or school-to-work, to enter in the labor market and use effective job-changing tools, and to access lifelong learning
- EITC, Health Care, and Child Care will assure that all working families -- but particularly young, two parent families -- are able to meet their responsibility to nurture and support their offspring and to lift the entire family out of poverty through work
- Paths to rising productivity, better earnings, and a more rewarding family life will be there for all young people -- and for their children -- who learn in school, work harder and smarter on the job, earn and save, and marry and bear children.

4. **Components Targeted to At-Risk-Youth**. These targeted programs should be understood as a part of a larger strategy, not magic bullets in and of themselves. They may provide ways to combine elements of other targeted strategies, as well as to supplement the broader message of opportunity and responsibility for all youth.

a. Responsibility (or Teen Pregnancy Prevention). School-linked, community-based challenge grant programs under Welfare Reform, Health Care Reform and ESEA for (1) childhood and early adolescent reproductive health information and responsibility resource centers (including dangers of early sex, risks of sexually transmitted disease and AIDS, harm to infants of low interval second birth) and (2) private and group responsibility counseling for adolescents (abstinence plus family planning; the harm to lifechances of bearing children while a teen, before graduating from high school and marriage; the responsibility of both fathers and mothers who bear or beget babies to nurture and support their children; the obligations of mutual respect owed to peers of the opposite sex).

b. Opportunity. Be the B.E.S.T. You Can Be Partnerships for Disadvantaged Youth -- Building Essential Skills for Tomorrow. Challenge grants with federal "glue money" targeted to the 2000 middle and high schools (and their 2,000,000 students) in urban and rural high-poverty pockets:

- to form long-term, institutional partnerships between targeted schools and broad-based consortia of employers, community-based organizations and community police, churches, associations, mentoring groups and colleges and universities

- to establish long-term mentoring, tutoring and coaching relationships between participants from consortia and college students with students in targeted schools in grades 5-12
- to secure local matches from consortia and targeted schools
- to share the realities of the opportunities to learn, to achieve, to go to college or school-to-work, to enter the labor market, to marry and bear children; of the dignity of work, marriage and family, and lifelong learning to get ahead and to make a better life for yourself, your family, and your children; of the rewards of meeting personal responsibilities and sharing in community service
- to provide support for youth to stay in school and learn, to avoid drugs and teen pregnancy, to respect one another and the other sex, to play games and to participate in group activities after school, on weekends, and during the summer

Both the responsibility and opportunity challenge grants could be rolled out over five years to clusters of targeted schools (e.g., LEA's, SEA's, regional service areas) and the local consortia and colleges.

We need to make sure that the existing (or proposed) financing sources could be brought together to provide the federal "glue money" to support such a roll-out over a five-year period to most of the targeted schools. The key to the success of these targeted components is **not** the amount of money set aside to stimulate the challenge. Rather, it is

- the breadth of the institutional buy-in (e.g., colleges, Chamber, NAB, PIC, Churches and other voluntary association like AARP-Senior Citizens, Girls and Boys Club, Big Brother-Big Sister, Police Athletic Leagues)
- the depth of the personal and group relationships (coaching, mentoring, recreational and learning experiences)
- the extent of the commitment, support, spirit and innovation reflected in the local applications.

It is critical that young adults who are succeeding in school or at work be major participants and role models for their younger peers.

Over a five-year period, such targeted challenge grants could evolve into a national network (1) of school-linked, community-based health resource and responsibility centers and (2) institutional, Be the BEST You Can Be Partnerships with a "million mentors" serving millions of otherwise at-risk youth. These challenge grants offer a way to establish a network of supports of responsible and caring adults for at-risk youth who are isolated from hope and opportunity now; over time, a informal network to connect these youth with the local labor market and the personal contacts to jobs may also develop. The resulting mix of real opportunities and personal responsibility holds real promise of increasing high school graduation rates, reducing early childbearing out of wedlock, increasing children born to

young married couples, and increasing the numbers of otherwise at-risk youth who succeed in college or the labor market.

The real question, then, is how much in **additional** federal dollars is necessary to leverage meaningful partnerships and responses for targeted schools and community consortia across the country?

5. **National Mobilization and Presidential Leadership**. Any campaign -- whether for teen pregnancy prevention or for youth opportunity and responsibility -- has a better chance of success if it is based on a national mobilization which establishes a major, national institutional presence. To do so, will require both (a) a focussed effort within the federal government and (b) a truly national institution, with broad-based private support. Whatever its form, such a national mobilization should include:

- an all-star video, high-lighted by the President's conversation with the Kramer High School Students

- a public service campaign of the breadth and scope of the anti-smoking and drug-free campaigns

- an information clearinghouse with model programs, evaluations, information, curricula, and an on-line network

- a coordinated challenge grant process, with federal and private sector support

- a focal point for demonstrating how diverse agency programs and initiatives can either be used in complementary ways or actually merged in response to local plans

- a method for creating state and/or local chapters and organizing supportive national, state, and local constituencies

a. **Organizational Structure**. Such a national mobilization could be organized in one of two ways:

- As an integral part of welfare reform legislation, we could propose that Congress create a new entity, with members from the federal government, states and localities and the private sector appointed by the President. This runs the risks of loss of control of the basic message in the cauldron of Hill politics but, if successful, provides the clearest authority for a truly national mobilization.

- As an integral part of our welfare reform announcement, we could announce (a) the formation of a private partnership (e.g., a 501(c)(3) non-profit) with a

board of worthy directors and its mission established in its charter to support the initiative and (b) the delegation of the federal interagency functions to the Ounce of Prevention Council, the Community Enterprise Board, the National Service Corporation, or some other entity established by executive directive of the President. The message and terms of this mobilization would remain more clearly in the control of the President at the outset, but continuing success and vitality would depend (a) on the coordination and commitment of disparate federal Agencies and (b) the spirit, commitment and drive of the private entity created to lead the national mobilization.

b. **Presidential Leadership**. The extent to which the President can or should lead such a national mobilization and campaign is the final issue. This depends on a number of substantive, political, and practical factors, not the least of which is his time. The Campaign for Youth Opportunity and Responsibility does provide a platform for continuing leadership by this President -- a bully pulpit that allows Bill Clinton to communicate with young people a message of character and substance, personal responsibility and economic opportunity. It is a message that will resonate with people of all ages, races and circumstances throughout the country.

DEPARTMENT OF HEALTH & HUMAN SERVICES
Office of the Secretary
Washington, D.C. 20201

March 14, 1994

MEMORANDUM

TO : Paul Dimond

FROM : Peter Edelman PBE
Counselor to the Secretary

SUBJECT: Meeting

Following up on our conversation, I would suggest a mentoring initiative (a "Million Mentors Initiative"?) as outlined below. (This memorandum has been reviewed by colleagues at HHS and the Department of Education as well.)

1. Carve out $25 - $50 million over 5 years from the Ounce of Prevention provisions of the crime bill by inserting this program into the crime bill in conference.

2. Give the money to the Ounce of Prevention Council that is set up by the Senate Crime Bill and is already receiving the Ounce of Prevention funds. That Council, as the Senate bill is currently drafted, is co-chaired by the AG and the Secretaries of Education and HHS, and includes also the Secretaries of Labor, HUD, Agriculture, and the ONDCP Director.

3. The $5 - $10 million annually would support 25 to 50 grants of $100,000 to $500,000 (averaging about $200,000) to support local co-ordination mechanisms for mentoring. Funds should be provided also for 3 to 5 FTEs to administer the program, and for technical assistance and evaluation.

4. The money would be targeted to portions of cities and rural sections of states having EZ-EC poverty characteristics or other indicators such as high teen birth rates or schools that have exceptionally high poverty rates (e.g., 75%). Targeting very high-poverty schools is particularly appropriate because the reauthorization of ESEA includes a mentoring component for high-poverty middle and high schools.

5. Applicants could be units of government, school districts, colleges and universities, non-profit organizations, or consortia of any of the above (the same list as authorized applicants for the Ounce of Prevention program), but they would have to demonstrate that they are applying on behalf of a partnership and after a process that includes business, labor, neighborhood leadership, schools, IHEs, youth serving organizations, elected officials, the non-profit community, retiree groups, and so on.

6. The goal and message should be a focus on high-risk youth. The age of the youth targeted for the mentoring should be essentially school-age children, including out-of-school youth. Mentoring makes particular sense with younger children, especially of middle-school age. Sixth grade is the minimum starting point. Potential mentors would include adults (both from the neighborhood and from business, professional, academic, and other sectors), college and university students, and peers.

7. Applicants would be asked to show in their applications how they are using other local, state and federal funds (including Chapter 1, School to Work, Youth Fair Chance, JTPA Title II) to support the mentoring program. Given an average funding level of $200,000 a grant, the federal funds would have to be seen as "glue money".

8. Applicants also would be strongly encouraged to show that they are introducing mentoring into other programs and activities. The Ounce of Prevention Council would be charged with seeking to leverage mentoring into all other relevant programs at the federal level, including chapter 1, Youth Fair Chance, school-to-work, and JTPA Title II. It would, more broadly, be charged with being the advocate and clearing house for mentoring across the federal government.

9. To be successful, programs must be well-structured, long-term, and provide adequate training and support. The legislative history should make clear that mentoring is not a simple activity to undertake. It requires care in the selection of mentors, the matching of mentors to mentees, supervision, and infrastructure. Mentoring does not take place in a vacuum. It is an important activity but not a solution by itself for most young people. It must be imbedded in broader youth development strategies that include tutoring, recreation of all kinds, exposure to the labor market, and so on.

10. All programs should include a school-based component. Successful mentoring efforts create connection between time in and out of school. Each mentoring program would include some school-based component, including school-based staff, to ensure this connection.

11. One set of questions to be decided relates to student financial aid. (1) Student work study can be used to pay mentors, who are college and university students. In order to give IHEs an incentive to create mentoring slots for work study students, a subsidy might be available to IHEs through the grant program. The Department of Education is also exploring whether it is possible to waive the 20% institution match for work study for IHEs that participate

in this grant (or across the board for IHEs that do mentoring programs). (2) The National Early Intervention Scholarship and Partnership program, a currently unfunded state grant program, might be a vehicle to guarantee mentees a college tuition. Since no regulations have yet been written for this program, it might be possible to target it just on those kids who are in these mentoring projects. However, there are significant questions about how to implement a geographically targeted tuition assistance program that reaches students early, given that families move so much. Also, depending on its design, it could have significant costs; and if it did not cost very much, it might have correspondingly little effect.

cc: Judy Wurtzel
Barbara Broman

TO: Bill Galston

FROM: Kathy Sylvester

RE: Teen pregnancy

Here's a broad outline of the paper. What you don't have are the introduction that analyzes the trends and lays out what we know about teens' sexual behavior and what affects it, the arguments for what has to happen next, and lengthy rationales and examples of research that back up each recommendation.

PRINCIPLES:

* Most children are "two-parent" children. Thus, our goal must be to bring children into homes where they have two parents to support and nurture them. Policies must be designed to encourage young men and women to delay sexual activity until they are able to engage in sex in a responsible way. This will increase their educational attainment and make them more likely to marry--the two factors that are most likely to provide stable outcomes for their children.

* We must define "responsible behavior" as taking responsibility for sexual activity. That means young people should delay sex until they are able to use birth control responsibly to prevent pregnacy and sexually transmitted diseases. But it's not enough to stigmatize "unresponsible" behavior, we must give them resources and skills to avoid that behavior as well as reasons to avoid it.

* We acknowledge the complexity of the problem and broaden the focus of this effort to all of those who play a part in the teenage pregnancy problem: the young men, the mothers, the older men who force young women to have sex too soon.

* Our definition of moral behavior and our proposed solutions must be mutually reinforcing. Conservatives condemn teen sexual behavior and preach abstinence without giving teens the skills and resources to say no. Liberals, by contrast, seek to support teen parents without condemning their behavior.

RECOMMENDATIONS:

1. Abstinence should be the goal for younger teens, safe and effective contraception the goal for older teens. This requires family life and sexuality education programs and life skills programs as early as grade school with sex education as early as fifth and sixth grade.

2. Use funds from Title X of the Public Health Service Act to provide challenge grants to the states. These grants would fund clinics to provide easy access to health care including contraceptive information and services, for young men and women. Because many of the young women and their partners are not in school, these cannot be only school-based. These services must be anonymous and comprehensive.

3. Require parenting education for all teens. Require parenting "certification" as a condition for getting a drivers' license and for high school graduation. Include as part of parenting education exposure to teen parents and their children who are in school-based day-care centers.

4. Reward school attendance and non-parenting with monthly stipends (short-term) and Individual Development Accounts (long-term). Both should be means tested.

5. Enforce rape and incest laws and establish mandatory minimums for both crimes. Change the laws to hold non-participating adults responsible for rape and incest committed on minors in their care.

6. Create an incentive system for welfare mothers with teenage sons and daughters. Raise their monthly payments if their minor children don't father children or become pregnant.

7. Create local "family resource centers" as the hubs of informal networks that allow welfare families to raise their welfare payments through an opportunity card system. With these cards, they would get "credit" for a variety of activities. All of these activities would aimed at connecting the teens to community institutions (thus increasing their opportunities to connect to natural mentors), getting parents and teens participating in some of the same activities and providing healthy outcomes for the babies. These would include such activities as taking parenting classes, babysitting at welfare offices, working in school-based day-care centers, enrolling in Parents as Teachers, taking sons and daughters to birth-control clinics, getting immunizations, going to well-baby clinics. These could be optional or mandatory.

8. Require non-working welfare mothers to give time at the day-care centers of their grandchildren so that they will learn the same parenting skills as their daughters.

9. Require minor mothers to live at home. Recognize, however, that there must be viable alternatives for those who are endangered in their own homes. One such alternative is establishing group homes for young mothers and their children.

10. Establish paternity at birth. Enforce child support and raise the disregard from $50 to a sliding amount based on how much support is recaptured.

11. Require non-working fathers who can't make financial contributions to make in-kind contributions, such as working at their children's day-care centers or work at community service jobs with credit given to the welfare check of the baby's mother. This would make them accept responsibiity, teach them parenting skills, link them to their children in a positive way, give them a right to see their children, and bring males into the day-care setting.

12. Consider strategies to stigmatize teen fathers, such as denying eligibility for school sports teams and other school activities (a raneg of activities similar to those the teen mothers must give up.)

13. Acknowledge the importance of peer pressure. Establish support groups as an alternative to the pervasive peer pressure for early sexual involvement and parenting. The dollar-a-day programs work because they give young people mentors and a sense of belonging.

14. Provide mentors for young men and women, recognizing that the presence of one caring adult is the single-most effective intervention against negative outcomes for at-risk teens. One natural source of mentors are the older working-class people, still living in urban areas, who share middle class values and have more free time than professionals.

15. Change adoption laws to expand the definition of "family" and make it easier for children of teen mothers to be adopted quickly. Only 6 percent of unmarried teens give up their children for adoption.

16. Develop a media campaign to stigmatize the act of "premature parenting" -- not the children who result from it. Come up with an alternative to to "illegitimate" and "out-of-wedlock" -- a name that labels the behavior of the parents and conveys that such behavior is socially unacceptable. Get help designing a national media campaign from the corporate entities that market to kids -- Nike, Reebok, Coke, Pepsi, and Levis. Challenge Hollywood to create a "realistic" teen soap opera.

Welfare Reform/Mentoring 3-15-94

One leg of welfare reform is ~~P~~ Prevention.
Teen Pregnancy is big part of Prevention

Responsibility Side & opportunity Side

Process Questions
(1) Does Pres get involved?
(2) Does it need further Congressional or will we do it Admin.
(3) Should we pitch this to welfare reform meeting this Sat?

Sperling wants to tie Mentoring idea with Educational opportunities

Funding
- work-study $
(- school-to-work tie in for non-college bound?)
- Pell Grants

Opportunities Side
- school to work
- Youth employment piece in crime bill
- Goals 2000
- Pell Grants, Income Contingent Loan Program
- Work Study
- Mentors Program
- Institutional Partnerships
  - scheds/colleges
  - community
  - private sector

(chapter 1 reforms?

Peter Edelman – Million Mentors program

- 25-50 grants to cities
- ave $200,000 ($100,000 - $500,000
- Community Partnership Effort .. come up with Mentorship Plan - focus on high risk youth
- whatever entity had authority over this .. would coordinate fed mentoring effort - clearinghouse
- all programs have school-based component

Non-college Bound ??

- Nat Alliance Business Mentoring Program
- Chamber of Commerce Adopt-a-school Initiative
- Big Brothers/Big Sisters Programs
- Retired Groups (AARP)

→ need to partner up-front with these groups

Message

Part of a larger strategy -- can't do it alone -- need to build wider partnerships -- this is not the answer -- part of longer campaign of ed-opportunity, lifelong learning, etc.

- also, seed-money available to help (not like points of light ~~[illegible]~~) public-private partnerships

(schools)

- add rytm of outcome measures ~~- perhaps target some $ to particularly at-risk students (AFDC kids)~~

- Outcomes tied to Goals

- need some institutional context/process here. Need infrastructure.

  - Need to have a community base, outside, college partner) (college is vital partner, but not only

- Scale is a real issue.

  - HHS proposed 50 sites
  - welfare reform will touch much more of the problem
  - In 5 years, every Chapter 1 school would have this available. (2,000 - 3,000 schools in Chapt 1)

- How much federal $ do we need to leverage private response.

The Kindness of Strangers - Mark (~~Epstein~~ (HOE) ~~Feldman~~ Freedman

Steve Hamilton (Columbia) also has done some work

DOED - Study of successful Mentoring Programs Barbara Vespucci

Eugene Lang
- Idea of college education was not reason for success
- instead, it was the support structure they put in place for children & families that made the difference.

- Politically & policy wise - Teen Pregnancy must be touched upon -- key to being tripped in welfare system

what we know

- Young Teens (12-15) abstinence message is key
- older teens - abstinence "plus" message
  abs + contraception
- Need to keep kids in school
- National Mobilization Needed - not only minorities
- structure?
  - some structure at Nat. level
  - information clearinghouse function on successful programs
- Ad Council & others in media are eager to take part in Nat. Advertising Campaign -- lots of communication opportunities (video)
- Real Puzzle -- Nature of federal role here? Some sort of Consolidation of teen prevention programs (a la Reemployment Act Model) - create some central organizational Model

Resp

- No teen preg
- No early sex / safe sex
- School-linked

HS dropout
teen pregnancy
drugs
violence

→ low life choices

Do we:

① Put a lot of stuff under one Personal Responsibility/Opportunity Banner - Broad Program

② Specific Teen Pregnancy prevention Campaign

broad is good: - Pres can use broad message every day
- Can combine lots of stuff into one push

Welfare Reform
⇒ making work pay
⊖ Parental Responsibility
- Transitional Assistance to work
⊖ Reinventing Govt

~~Campaign~~ Campaign

- Need a single, org. focus of activity
- Need a national Mobilization

~~options~~
- CEB
- Interagency group
- Pub/Private commission/Board

welfare reform → opens door for broader opp/Responsibility campaign

THE WHITE HOUSE

WASHINGTON

March 14, 1994

MEMORANDUM FOR ELI SEGAL

FROM: Carol H. Rasco CHR

SUBJECT: Mentoring Working Group

In follow up to my previous memo about this working group, I am designating Mike Schmidt to represent the Domestic Policy Council. You may reach him by calling 456-2165 or by mail at OEOB Room 220.

Thank you.

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

01-Mar-1994 06:31pm

TO: FAX (9-606-4928,Eli Segal)

FROM: Carol H. Rasco
Economic and Domestic Policy

SUBJECT: Response to 2/28 letter

I think the idea of Peter Edelman leading a working group on mentoring is terrific! DPC would love to "sanction" it...let me know if you need anything official. I think the chances are good there will be departments beyond those you list who will want to participate.

In the meantime, please include the DPC on the roster of participants and I'll have a representative in place once a meeting is called.

Thanks so much!

CORPORATION FOR
NATIONAL
AND
COMMUNITY
SERVICE

MEMORANDUM

February 28, 1994

To: Carol Rasco

From: Eli Segal

Re: mentoring

In the past few weeks I have been made aware of several mentions of mentoring as a strategy for dealing with a variety of issues. Early drafts of the drug control strategy document and the violence reduction task force report mention mentoring. There is a new $4 million categorical grants program at DOJ in the Juvenile Justice division. Terry Peterson and Mike Smith at Education are interested in promoting mentoring.At the Corporation we have had conversations with several organizations interested in mentoring and national service.

It occurs to me that with all of these bits and pieces around the government and interest from the non-profit sector, it would be useful to bring folks together for information sharing and discussion. I would propose that the interagency council that Peter Edelman chairs for the Corporation to encourage cooperation between the Corporation and the federal agencies, provide the auspices for such a conversation. Representatives from Justice, Education, HHS, Drug Control Policy and other interested departments would be invited to participate. Peter would facilitate the meetings.

If you agree that this is worthwhile, I would appreciate DPC endorsement of the idea and formation of this discussion group. I know that you share an interest in this issue and might be able to suggest others outside government whom we should include in our discussions.

cc: Peter Edelman
Susan Stroud
Shirley Sagawa

1100 VERMONT AVENUE, NW • WASHINGTON, DC 20525

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

07-Mar-1994 02:54pm

TO: Rosalyn A. Miller

FROM: Michael T. Schmidt
Domestic Policy Council

SUBJECT: Mentoring Working Group

I would love to be the DPC's rep to the mentoring working group outlined in Eli Segal's memo to Carol. Just let me know when the first meeting is and I'll be there. Also, Carol may want to suggest to Eli that the mentoring group work in close cooperation with the Education, Training, and Reemployment (ETR) initiative that she and Bob Rubin are co-chairing. The mentoring issue fits in nicely with some of the work that the ETR Policy Working Group is doing, and I know that Peter Edelman and Mike Smith are a part of the Policy WG as well.

Roz - Good idea however I'll depend on Mike to keep up w/ group & tell him.

Roz - do memo for my sig. to Eli ~~Add~~ naming Mike as my rep.

THE WHITE HOUSE

WASHINGTON

- Narrative Good (irreconcilable for 4 yrs)
- p. 7 - (missing) - time limited demos? 5 yrs
  - dollar amounts? - w/ yet

- Specs talk about DG doing lots of stuff w/o L'sec.

(1) → Does this complicate jurisdiction on Hill, esp. b/t Judiciary & Ed + Labor? IF SO, we should do through exec. action.

→ what is leg affairs take on this?

Urban Excellence Corps

primary focus - Colleges & Universities in or near urban areas
secondary focus: Private Corp?

Responsibility Theme
- pledge not to commit crimes, drug use,

Opportunity Theme
$ for school (work study, Pell Grants)

Visit the CEO

- How do we tie in Private sector?
  - $ for young people
- ~~School~~ Colleges come with plans

150 million -- how many ways

1. Saturation or Broad availability?
2. Who in Admin Given charge?
   - Status? VP? Tipper? Sec. Ed? HHS? outside Admin?
3. Have them Hold Conf of Consume Board to come up with Broad Goals
   - communities come up w specific program benchmarks

(3) Mobilization: Pres Event? Press Conf? (M+V)

- Nothing wrong w/ gathering input before going forward, but should mostly be a ~~top-down~~ bottoms-up process

Urban Excellence Caps 3-10-94

~~$516?~~ NEISP
$50 million for disadvantaged students to go to College
- mentoring
- program

- Target high-poverty urban areas (do some rural)
- Have enough work study, Pell Grants, etc to allow every kid that wants to go to school
- Colleges adopt schools
- Coaching idea - not one-on-one
- Private sector Employer Can't be part needed
  - tie in to school to-work
  - Kids who are successful in private sector

- Goals 2000 Model - Performance-based measures?

Campaign to combat teen pregnancy
- Responsibility Theme
- opportunity theme

Goals
- 90% Grad rates
- ↓ Teen Pregnancy rates

Expand Camp → Universities have institutional stability

- State Grant Process for colleges
- Work Study $ (i.e. in stipend) is perfect - exactly what it was supposed to do

Subtitle G—Comprehensive School Health Education; School-Related Health Services

PART 1—GENERAL PROVISIONS

SEC. 3601. PURPOSES.

Subject to the subsequent provisions of this subtitle, the purposes of this subtitle are as follows:

(1) To support the provision in kindergarten through grade 12 of sequential, age-appropriate, comprehensive health education programs that address locally relevant priorities.

(2) To establish a national framework within which States can create comprehensive school health education programs that—

(A) target the health risk behaviors accounting for the majority of the morbidity and mortality among youth and adults, including the following: Tobacco use; alcohol and other drug abuse; sexual behaviors resulting in infection with the human immunodeficiency virus, in other sexually transmitted diseases or in unintended pregnancy; behaviors resulting in intentional and unintentional injuries; dietary patterns resulting in disease; and sedentary lifestyles; and

(B) are integrated with plans and programs in the State, if any, under title III of the Goals 2000: Educate America Act and those targeting health promotion and disease prevention goals related to the national health objectives set forth in Healthy People 2000.

(3) To pay the initial costs of planning and establishing Statewide comprehensive school health education programs that will be implemented and maintained with local, State, and other Federal resources.

(4) To support Federal activities such as research and demonstrations, evaluations, and training and technical assistance regarding comprehensive school health education.

(5) To motivate youth, especially low-achieving youth, to stay in school, avoid teen pregnancy, and strive for success by providing intensive, high-quality health education programs that include peer-teaching, family, and community involvement.

(6) To improve the knowledge and skills of children and youth by integrating academic and experiential learning in health education with other elements of a comprehensive school health program.

(7) To further the National Education Goals set forth in title I of the Goals 2000: Educate America Act and the national health objectives set forth in Healthy People 2000.

SEC. 3602. DEFINITIONS.

(a) COMPREHENSIVE SCHOOL HEALTH EDUCATION PROGRAM.—For purposes of this subtitle, the term "comprehensive school health education program" means a program that addresses locally relevant priorities and meets the following conditions:

(1) The program is sequential, and age and developmentally appropriate.

(2) The program is provided, in the area served by the program, every year for all students from kindergarten through grade 12.

(3) The program provides comprehensive health education, including the following components:

(A) Community health.

(B) Environmental health.

(C) Personal health.

(D) Family life.

(E) Growth and development.

(F) Nutritional health.

(G) Prevention and control of disease and disorders.

(H) Safety and prevention of injuries.

(I) Substance abuse, including tobacco and alcohol use.

(J) Consumer health, including education to ensure that students understand the benefits and appropriate use of medical services, including immunizations and other clinical preventive services.

(4) The program promotes personal responsibility for a healthy lifestyle and provides the knowledge and skills necessary to adopt a healthy lifestyle, including teaching the legal, social, and health consequences of behaviors that pose health risks.

(5) The program is sensitive to cultural and ethnic issues in the content of instructional materials and approaches.

(6) The program includes activities that support instruction.

(7) The program includes activities to promote involvement by parents, families, community organizations, and other appropriate entities.

(8) The program is coordinated with other Federal, State, and local health education and prevention programs and with other Federal, State and local education programs, including those carried out

title:

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under title I of the Elementary and Secondary Education Act of 1965.

(9) The program focuses on the particular health concerns of the students in the State, school district, or school, as the case may be.

(b) OTHER DEFINITIONS.—For purposes of this subtitle:

(1) The term "local educational agency" has the meaning given such term in section 1471(12) of the Elementary and Secondary Education Act of 1965.

(2) The term "State educational agency" has the meaning given such term in section 1471(23) of the Elementary and Secondary Education Act of 1965.

PART 2—SCHOOL HEALTH EDUCATION; GENERAL PROVISIONS

SEC. 3611. AUTHORIZATIONS OF APPROPRIATIONS.

(a) FUNDING FOR SCHOOL HEALTH EDUCATION.—For the purpose of carrying out parts 3 and 4, there are authorized to be appropriated $50,000,000 for each of the fiscal year 1995 through 2000.

(b) ALLOCATIONS.—Of the amounts appropriated under subsection (a) for a fiscal year—

(1) the Secretary may reserve not more than $13,000,000 for carrying out part 4;

(2) the Secretary may reserve not more than $5,000,000 to support national leadership activities, such as research and demonstration, evaluation, and training and technical assistance in comprehensive school health education; and

(3) the Secretary may reserve not more than 5 percent for administrative expenses regarding parts 3 and 4.

(c) RELATION TO OTHER FUNDS.—The authorizations of appropriations established in subsection (a) are in addition to any other authorizations of appropriations that are available for the purpose described in such subsection.

SEC. 3612. WAIVERS OF STATUTORY AND REGULATORY REQUIREMENTS.

(a) IN GENERAL.—

(1) WAIVERS.—Except as provided in subsection (c), upon the request of an entity receiving funds under part 3 or part 4 and under a program specified in paragraph (2), the Secretary of Health and Human Services or the Secretary of Education (as the case may be, according to which Secretary administers the program so specified) may grant to

Title III, Subtitle G

the entity a waiver of any requirement of such program regarding the use of funds, or of the regulations issued for the program by the Secretary involved, if the following conditions are met with respect to such program:

(A) The Secretary involved determines that the requirement of such program impedes the ability of the State educational agency or other recipient to achieve more effectively the purposes of part 3 or 4.

(B) The Secretary involved determines that, with respect to the use of funds under such program, the requested use of the funds by the entity would be consistent with the purposes of part 3 or 4.

(C) In the case of a request for a waiver submitted by a State educational agency, the State educational agency—

(i) provides all interested local educational agencies in the State with notice and an opportunity to comment on the proposal; and

(ii) submits the comments to the Secretary involved.

(D) In the case of a request for a waiver submitted by a local educational agency or other agency, institution, or organization that receives funds under part 3 from the State educational agency, such request has been reviewed by the State educational agency and is accompanied by the comments, if any, of such agency.

(2) RELEVANT PROGRAMS.—For purposes of paragraph (1), the programs specified in this paragraph are as follows:

(A) In the case of programs administered by the Secretary of Health and Human Services, the following:

(i) The program known as the Prevention, Treatment, and Rehabilitation Model Projects for High Risk Youth, carried out under section 517 of the Public Health Service Act.

(ii) The program known as the State and Local Comprehensive School Health Programs to Prevent Important Health Problems and Improve Educational Outcomes, carried out under such Act.

(B) In the case of programs administered by the Secretary of Education, any program

carried out under part B of the Drug-Free Schools and Communities Act of 1986.

(b) WAIVER PERIOD.—

(1) IN GENERAL.—A waiver under this section shall be for a period not to exceed three years.

(2) EXTENSIONS.—The Secretary involved under subsection (a) may extend such period if the Secretary determines that—

(A) the waiver has been effective in enabling the State or affected recipients to carry out the activities for which it was requested and has contributed to improved performance; and

(B) such extension is in the public interest.

(c) WAIVERS NOT AUTHORIZED.—The Secretary involved under subsection (a) may not waive, under this section, any statutory or regulatory requirement relating to—

(1) comparability of services;

(2) maintenance of effort;

(3) the equitable participation of students attending private schools;

(4) parental participation and involvement;

(5) the distribution of funds to States or to local educational agencies or other recipients of funds under the programs specified in subsection (a)(2);

(6) maintenance of records;

(7) applicable civil rights requirements; or

(8) the requirements of sections 438 and 439 of the General Education Provisions Act.

(d) TERMINATION OF WAIVER.—The Secretary involved under subsection (a) shall terminate a waiver under this section if the Secretary determines that the performance of the State or other recipient affected by the waiver has been inadequate to justify a continuation of the waiver or if it is no longer necessary to achieve its original purposes.

PART 3—SCHOOL HEALTH EDUCATION; GRANTS TO STATE EDUCATION AGENCIES

Subpart A—Planning Grants for State Education Agencies

SEC. 3621. APPLICATION FOR GRANT.

(a) IN GENERAL.—Any State educational agency that wishes to receive a planning grant under this subpart shall submit an application to the Secretary of Health and Human Services, at such time and in such manner as the Secretary may require.

(b) APPLICATION; JOINT DEVELOPMENT; CONTENTS.—An application under subsection (a) shall be jointly developed by the State educational agency and the

State health agencies of the State involved, and shall contain the following:

(1) An assessment of the State's need for comprehensive school health education, using goals established by the Department of Health and Human Services and the Department of Education and the State's school improvement plan, if any, under title III of Goals 2000: Educate America Act.

(2) A description of how the State educational agency will collaborate with the State health agency in the planning and development of a comprehensive school health education program in the State, including coordination of existing health education programs and resources.

(3) A plan to build capacity at the State and local levels to provide staff development and technical assistance to local educational agency and local health agency personnel involved with comprehensive school health education.

(4) A preliminary plan for evaluating comprehensive school health education activities.

(5) Information demonstrating that the State has established a State-level advisory council whose membership includes representatives of the State

agencies with principal responsibilities for programs regarding health, education, and mental health.

(6) A timetable and proposed budget for the planning process.

(7) Such other information and assurances as the Secretary may require.

(c) NUMBER OF GRANTS.—States may receive one planning grant annually and no more than two planning grants may be awarded to any one State.

SEC. 3622. APPROVAL OF SECRETARY.

The Secretary may approve the application of a State under section 3621 if the Secretary determines that—

(1) the application meets the requirements of this subpart; and

(2) there is a substantial likelihood that the State will be able to develop and implement a comprehensive school health education plan that complies with the requirements of subpart B.

SEC. 3623. AMOUNT OF GRANT.

For any fiscal year, the minimum grant to any State under this subpart is an amount determined by the Secretary to be necessary to enable the State to conduct the planning process, and the maximum such grant is $500,000.

SEC. 3624. AUTHORIZED ACTIVITIES.

A State may use funds received under this subpart only for the following:

(1) To establish and carry out the State planning process.

(2) To conduct Statewide or sub-State regional coordination and collaboration activities for local educational agencies, local health agencies, and other agencies and organizations, as appropriate.

(3) To conduct activities to build capacity to provide staff development and technical assistance services to local educational agency and local health agency personnel involved with comprehensive school health education.

(4) To develop student learning objectives and assessment instruments.

(5) To work with State and local health agencies and State and local educational agencies to reduce barriers to the implementation of comprehensive school health education programs in schools.

(6) To prepare the plan required to receive an implementation grant under subpart B.

(7) To adopt, validate, and disseminate curriculum models and program strategies, if the Secretary determines that such activities are necessary to achieving the objectives of the State's program.

Subpart B—Implementation Grants for State Education Agencies

SEC. 3631. APPLICATION FOR GRANT.

(a) IN GENERAL.—Any State that wishes to receive an implementation grant under this subpart shall submit an application to the Secretary of Health and Human Services, at such time, in such manner, and containing such information and assurances as the Secretary may require.

(b) APPLICATION AND STATE PLAN; JOINT DEVELOPMENT; CONTENTS.—An application under subsection (a) shall be jointly developed by the State educational agency and the State health agencies of the State involved, and shall include a State plan for comprehensive school health education programs (as defined in section 3602) that describes the following:

(1) The State's goals and objectives for those programs.

(2) How the State will allocate funds to local educational agencies in accordance with section 3634.

(3) How the State will coordinate programs under this subpart with other local, State and Federal health education programs.

(4) How comprehensive school health education programs will be coordinated with other local, State

and Federal education programs, such as programs under title I of the Elementary and Secondary Education Act of 1965, with the State's school improvement plan, if any, under title III of the Goals 2000: Educate America Act, and with any similar programs.

(5) How the State has worked with State and local education agencies and with State and local health agencies to reduce barriers to implementing comprehensive school health education programs.

(6) How the State will monitor the implementation of such programs by local educational agencies.

(7) How the State will build capacity for professional development of health educators.

(8) How the State will provide staff development and technical assistance to local educational agencies.

(9) The respective roles of the State educational agency, local educational agencies, the State health agency, and the local health agencies in developing and implementing such school health education programs.

(10) How such school health education programs will be tailored to the extent practicable to be culturally and linguistically sensitive and responsive

to the various needs of the students served, including individuals with disabilities, and individuals from disadvantaged backgrounds (including racial and ethnic minorities).

(11) How the State will evaluate and report on the State's progress toward attaining the goals and objectives described in paragraph (1).

SEC. 3632. SELECTION OF GRANTEES.

(a) SELECTION OF GRANTEES.—The Secretary shall establish criteria for the competitive selection of grantees under this subpart.

(b) OPPORTUNITY FOR PLANNING GRANT.—If the Secretary does not approve a State's application under this subpart and determines that the State could benefit from a planning grant under subpart A, the Secretary shall inform the State of any planning grant funds that may be available to it under subpart A, subject to section 3621(c).

SEC. 3633. AMOUNT OF GRANT.

(a) IN GENERAL.—For any fiscal year, the minimum grant to any State under this subpart is an amount determined by the Secretary to be necessary to enable the State to conduct the implementation process.

(b) CRITERIA.—In determining the amount of any such grant, the Secretary may consider such factors as

the number of children enrolled in schools in the State, the number of school-aged children living in poverty in the State, and the scope and quality of the State's plan.

SEC. 3634. AUTHORIZED ACTIVITIES; LIMITATION ON ADMINISTRATIVE COSTS.

(a) SUBGRANTS TO LOCAL EDUCATIONAL AGENCIES.—Each State that receives funds under this subpart for any fiscal year shall retain not more than 75 percent of those funds in the first year, 50 percent of those funds in the second and third years, and 25 percent of those funds in each succeeding year. Those funds not retained by the State shall be used to make grants to local educational agencies in accordance with section 3635.

(b) STATE-LEVEL ACTIVITIES.—Each State shall use retained funds for any fiscal year for the following purposes:

(1) To conduct Statewide or sub-State regional coordination and collaboration activities.

(2) To adapt, validate, or disseminate program models or strategies for comprehensive school health education.

(3) To build capacity to deliver staff development and technical assistance services to local educational agencies, and State and local health agencies.

(4) To promote program activities involving families and coordinating program activities with community groups and agencies.

(5) To evaluate and report to the Secretary on the progress made toward attaining the goals and objectives described in section 3621(b)(1).

(6) To conduct such other activities to achieve the objectives of this subpart as the Secretary may by regulation authorize.

(c) STATE ADMINISTRATION.—Of the amounts received by a State for a fiscal year under this subpart and remaining after any grants to local educational agencies made from such amounts, the State may use up to 10 percent for the costs of administering such amounts, including the activities of the State advisory council and monitoring the performance of local educational agencies.

SEC. 3635. SUBGRANTS TO LOCAL EDUCATIONAL AGENCIES.

(a) APPLICATION FOR GRANT.—Any local educational agency that wishes to receive a grant under this subpart shall submit an application to the State, containing such information and assurances as the State may require, including a description of the following:

(1) The local educational agency's goals and objectives for comprehensive school health education programs.

(2) How the local educational agency will concentrate funds in high-need schools and provide sufficient funds to targeted schools to ensure the implementation of comprehensive programs.

(3) How the local educational agency will monitor the implementation of these programs.

(4) How the local educational agency will ensure that school health education programs are tailored to the extent practicable to be culturally and linguistically sensitive and responsive to the various needs of the students served, including individuals with disabilities, and individuals from disadvantaged backgrounds (including racial and ethnic minorities).

(5) How the local educational agency, in consultation with the local health agency, will evaluate and report on its progress toward attaining the goals and objectives described in paragraph (1).

(b) SELECTION OF SUBGRANTEES.—Each State shall give priority to applications from local educational agencies serving areas with high needs, as indicated by criteria developed by the State, which shall include, but need not be limited to, high rates of any of the following:

(1) Poverty among school-aged youth.

(2) Births to adolescents.

(3) Sexually transmitted diseases among school-aged youth.

(4) Drug and alcohol use among school-aged youth.

(5) Violence among school-aged youth.

(c) AUTHORIZED ACTIVITIES.—Each local educational agency that receives a grant under this subpart shall use the grant funds to implement comprehensive school health education programs, as defined in section 3602.

Subpart C—State and Local Reports

SEC. 3641. STATE AND LOCAL REPORTS.

(a) STATE REPORTS.—Each State that receives a grant under this part shall collect and submit to the Secretary such data and other information on State and local programs as the Secretary may require.

(b) IN GENERAL.— Each local educational agency that receives a grant under subpart B shall collect and report to the State such data and other information as the Secretary may require.

PART 4—SCHOOL HEALTH EDUCATION; GRANTS TO CERTAIN LOCAL EDUCATIONAL AGENCIES

Subpart A—Eligibility

SEC. 3651. SUBSTANTIAL NEED OF AREA SERVED BY AGENCY.

Any local educational agency is eligible for a grant under this part for any fiscal year if—

(1) the agency enrolls at least 25,000 students; and

(2) the geographic area served by the agency has a substantial need for such a grant, relative to other geographic areas in the United States.

Subpart B—Planning Grants for Local Education Agencies

SEC. 3661. APPLICATION FOR GRANT.

(a) IN GENERAL.—Any local educational agency that wishes to receive a planning grant under this subpart shall submit an application to the Secretary of Health and Human Services at such time and in such manner as the Secretary may require.

(b) STATE EDUCATIONAL AGENCY REVIEW.—Each such local educational agency, before submitting its application to the Secretary, shall submit the application to the State educational agency for comment by such agency and by the State health agencies of the State.

(c) CONTENTS OF APPLICATIONS.—Each such application shall contain the following:

(1) An assessment of the local educational agency's need for comprehensive school health education, using goals established by the Department of Health and Human Services and the Department of Education, as well as local health and education strategies, such as State school improvement plans, if any, under title III of the Goals 2000: Educate America Act.

(2) Information demonstrating that the local educational agency has established or selected a community-level advisory council, which shall include representatives of relevant community agencies such as those that administer education, child nutrition, health, and mental health programs.

(3) A description of how the local educational agency will collaborate with the State educational agency, the State health agency, and the local health agency in the planning and development of a comprehensive school health education program in the local educational agency, including coordination of existing health education programs and resources.

(4) A plan to build capacity at the local educational agency to provide staff development and

technical assistance to local educational agency and local health agency personnel involved with comprehensive school health education.

(5) A preliminary plan for evaluating comprehensive school health education activities.

(6) A timetable and proposed budget for the planning process.

(7) Such other information and assurances as the Secretary may require.

(d) NUMBER OF GRANTS.—Local educational agencies may receive at a maximum two annual planning grants.

SEC. 3662. SELECTION OF GRANTEES.

(a) SELECTION CRITERIA.—The Secretary shall establish criteria for the competitive selection of grantees under this part.

(b) LIMITATION.—The Secretary shall not approve an application from a local educational agency in a State that has an approved plan under subpart A or B of part 3 of this subtitle unless the Secretary determines, after consultation with the State that the local application is consistent with the State plan, if one exists.

SEC. 3663. AMOUNT OF GRANT.

For any fiscal year, the minimum grant to any local educational agency under this subpart is an amount deter-

mined by the Secretary to be necessary to enable the local educational agency to conduct the planning process, and the maximum such grant is $500,000.

SEC. 3664. AUTHORIZED ACTIVITIES.

A local educational agency may use funds received under this subpart only for the following:

(1) To establish and carry out the local educational agency planning process.

(2) To undertake joint training, staffing, administration, and other coordination and collaboration activities for local educational agencies, local health agencies, and other agencies and organizations, as appropriate.

(3) To conduct activities to build capacity to provide staff development and technical assistance services to local educational agency and local health agency personnel involved with comprehensive school health education.

(4) To develop student learning objectives and assessment instruments.

(5) To work with State and local health agencies and State educational agencies to reduce barriers to the implementation of comprehensive school health education programs in schools, by, for exam-

ple, ensuring that adequate time is a available during the school day for such programs.

(6) To prepare the plan required to receive an implementation grant under subpart C.

Subpart C—Implementation Grants for Local Educational Agencies

SEC. 3671. APPLICATION FOR GRANT.

(a) IN GENERAL.—Any local educational agency that wishes to receive an implementation grant under this subpart shall submit an application to the Secretary of Health and Human Services, at such time, in such manner, and containing such information and assurances as the Secretary may require.

(b) STATE EDUCATIONAL AGENCY REVIEW.—Each such local educational agency shall submit its application to the State educational agency for comment before submitting it to the Secretary.

(c) LOCAL EDUCATIONAL AGENCY PLAN.—Each such application shall include a local educational agency plan for comprehensive school health education programs (as defined in section 3602) that describes the following:

(1) The local educational agency's goals and objectives for those programs.

(2) How the local educational agency will coordinate programs under this subpart with other local, State and Federal health education programs.

(3) How comprehensive school health education programs will be coordinated with other local, State and Federal education programs, such as programs under title I of the Elementary and Secondary Education Act of 1965, and with State's school improvement plan, if any, under title III of the Goals 2000: Educate America Act.

(4) How the local educational agency has worked with State educational agencies and with State and local health agencies to reduce barriers to implementing comprehensive school health education programs.

(5) How local educational agencies will monitor the implementation of such programs.

(6) How the local educational agency, in consultation with the State educational agency and State and local health agencies and in conjunction with other local professional development activities, will build capacity for professional development of health educators.

(7) How the local educational agency, in consultation with the State educational agency and

State and local health agencies, will provide staff development and technical assistance.

(8) The respective roles of the State educational agency, local educational agencies, the State health agency, and the local health agencies in developing and implementing such school health education programs.

(9) How such school health education programs will be tailored to the extent practicable to be culturally and linguistically sensitive and responsive to the various needs of the students served, including individuals with disabilities, and individuals from disadvantaged backgrounds (including racial and ethnic minorities).

(10) How the local educational agency, in consultation with the local health agency, will evaluate and report on the local educational agency's progress toward attaining the goals and objectives described in paragraph (1).

SEC. 3672. SELECTION OF GRANTEES.

(a) SELECTION OF GRANTEES.—The Secretary shall establish criteria for the competitive selection of grantees under this subpart.

(b) LIMITATION.—The Secretary shall not approve an application from a local educational agency in a State

that has an approved plan under subpart A or B of part 3 unless the Secretary determines, after consultation with the State that the local application is consistent with such State plan.

(c) OPPORTUNITY FOR PLANNING GRANT.—If the Secretary does not approve a local educational agency's application under this subpart and determines that the local educational agency could benefit from a planning grant under subpart B, the Secretary shall inform the local educational agency of any planning grant funds that may be available to it under subpart B, subject to section 3661(d).

SEC. 3673. AMOUNT OF GRANT.

(a) IN GENERAL.—For any fiscal year, the minimum grant to any local educational agency under this subpart is an amount determined by the Secretary to be necessary to enable the local educational agency to conduct the implementation process.

(b) CRITERIA.—In determining the amount of any such grant, the Secretary may consider such factors as the number of children enrolled in schools in the local educational agency, the number of school-aged children living in poverty in the local educational agency, and the scope and quality of the local educational agency's plan.

SEC. 3674. AUTHORIZED ACTIVITIES.

Each local educational agency that receives a grant under this subpart shall use the grant funds as follows:

(1) To implement comprehensive school health education programs, as defined in section 3602.

(2) To conduct local or regional coordination and collaboration activities.

(3) To provide staff development and technical assistance to schools, local health agencies, and other community agencies involved in providing comprehensive school health education programs.

(4) To administer the program and monitor program implementation at the local level.

(5) To evaluate and report to the Secretary on the local educational agency's progress toward attaining the goals and objectives described in section 3671(c)(1).

(6) To conduct such other activities as the Secretary may by regulation authorize.

SEC. 3675. REPORTS.

Each local educational agency that receives a grant under this subpart shall collect and report to the Secretary and the State such data and other information as the Secretary may require.

PART 5—SCHOOL-RELATED HEALTH SERVICES

Subpart A—Development and Operation of Projects

SEC. 3681. AUTHORIZATIONS OF APPROPRIATIONS.

(a) FUNDING FOR SCHOOL-RELATED HEALTH SERVICES.—For the purpose of carrying out this subpart, there are authorized to be appropriated $100,000,000 for fiscal year 1996, $275,000,000 for fiscal year 1997, $350,000,000 for fiscal year 1998, and $400,000,000 for each of the fiscal years 1999 and 2000.

(b) RELATION TO OTHER FUNDS.—The authorizations of appropriations established in subsection (a) are in addition to any other authorizations of appropriations that are available for the purpose described in such subsection.

SEC. 3682. ELIGIBILITY FOR DEVELOPMENT AND OPERATION GRANTS.

(a) IN GENERAL.—Entities eligible to apply for and receive grants under section 3484 or 3485 are the following:

(1) State health agencies that apply on behalf of local community partnerships and other communities in need of adolescent health services within the State.

(2) Local community partnerships in States in which health agencies have not applied.

(b) LOCAL COMMUNITY PARTNERSHIPS.—

(1) IN GENERAL.—A local community partnership under subsection (a)(2) is an entity that, at a minimum, includes—

(A) a local health care provider with experience in delivering services to adolescents;

(B) one or more local public schools; and

(C) at least one community based organization located in the community to be served that has a history of providing services to at-risk youth in the community.

(2) PARTICIPATION.—A partnership described in paragraph (1) shall, to the maximum extent feasible, involve broad based community participation from parents and youth to be served, health and social service providers (including regional alliance health plans and corporate alliance health plans in which families in the community are enrolled), teachers and other public school and school board personnel, the regional health alliance in which the schools participating in the partnership are located, youth development and service organizations, and interested business leaders. Such participation may be evidenced through an expanded partnership, or an advisory board to such partnership.

SEC. 3683. PREFERENCES.

(a) IN GENERAL.—In making grants under sections 3484 and 3485, the Secretary shall give preference to applicants whose communities to be served show the most substantial level of need for such services among individuals who are between the ages of 10 and 19 (inclusive), as measured by indicators of community health including the following:

(1) High levels of poverty.

(2) The presence of a medically underserved area or population (as defined under section 330(a) of the Public Health Service Act).

(3) A health professional shortage area, as designated under section 332 of the Public Health Service Act.

(4) High rates of indicators of health risk among children and youth, including a high proportion of children receiving services through the Individuals with Disabilities Education Act, adolescent pregnancy, sexually transmitted disease (including infection with the human immunodeficiency virus), preventable disease, communicable disease, intentional and unintentional injuries among children and youth, community and gang violence, youth unemployment, juvenile justice involvement, and high rates of drug and alcohol exposure.

(b) LINKAGE TO QUALIFIED COMMUNITY HEALTH GROUPS.—In making grants under sections 3484 and 3485, the Secretary shall give preference to applicants that demonstrate a linkage to qualified community health groups (as defined in section 3421(a)).

SEC. 3684. GRANTS FOR DEVELOPMENT OF PROJECTS.

(a) IN GENERAL.—The Secretary may make grants to State health agencies or to local community partnerships to develop school health service sites.

(b) USE OF FUNDS.—A project for which a grant may be made under subsection (a) may include but not be limited to the cost of the following:

(1) Planning for the provision of school health services.

(2) Recruitment, compensation, and training of health and administrative staff.

(3) The development of agreements with regional and corporate alliance health plans and the acquisition and development of equipment and information services necessary to support information exchange between school health service sites and health plans, health providers, and other entities authorized to collect information under this Act.

(4) In the case of communities described in subsection (d)(2)(B), funds to aid in the establishment of local community partnerships.

(5) Other activities necessary to assume operational status.

(c) APPLICATION FOR GRANT.—

(1) IN GENERAL.—Applicants shall submit applications in a form and manner prescribed by the Secretary.

(2) APPLICATIONS BY STATE HEALTH AGENCIES.—

(A) In the case of applicants that are State health agencies, the application shall contain assurances that the State health agency is applying for funds—

(i) on behalf of at least one local community partnership; and

(ii) on behalf of at least one other community identified by the State as in need of the services funded under this part but without a local community partnership.

(B) In the case of communities identified in applications submitted by State health agencies that do not yet have local community partnerships, the State shall describe the steps that

will be taken to aid the community in developing a local community partnership.

(C) A State applying on behalf of local community partnerships and other communities may retain not more than 10 percent of grants awarded under this subpart for administrative costs.

(d) CONTENTS OF APPLICATION.—In order to receive a grant under this section, an applicant must include in the application the following information:

(1) An assessment of the need for school health services in the communities to be served, using the latest available health data and health goals and objectives established by the Secretary.

(2) A description of how the applicant will design the proposed school health services to reach the maximum number of school-aged children and youth at risk for poor health outcome.

(3) An explanation of how the applicant will integrate its services with those of other health and social service programs within the community.

(4) An explanation of how the applicant will link its activities to the regional and corporate alliance health plans serving the communities in which the applicant's program is to be located.

(5) A description of linkages with regional and corporate health alliances in whose areas the applicant's program is to be located.

(6) A description of a quality assurance program which complies with standards that the Secretary may prescribe.

(e) NUMBER OF GRANTS.—Not more than one planning grant may be made to a single applicant. A planning grant may not exceed two years in duration.

SEC. 3685. GRANTS FOR OPERATION OF PROJECTS.

(a) IN GENERAL.—The Secretary may make grants to State health agencies or to local community partnerships for the cost of operating school health service sites.

(b) USE OF GRANT.—The costs for which a grant may be made under this section include but are not limited to the following:

(1) The cost of furnishing health services that are not covered under title I of this Act or by any other public or private insurer.

(2) The cost of furnishing enabling services, as defined in section 3461(g).

(3) Training, recruitment and compensation of health professionals and other staff.

(4) Outreach services to at-risk youth and to parents.

(5) Linkage of individuals to health plans, community health services and social services.

(6) Other activities deemed necessary by the Secretary.

(c) APPLICATION FOR GRANT.—Applicants shall submit applications in a form and manner prescribed by the Secretary. In order to receive a grant under this section, an applicant must include in the application the following information:

(1) A description of the services to be furnished by the applicant.

(2) The amounts and sources of funding that the applicant will expend, including estimates of the amount of payments the applicant will received from alliance health plans and from other sources.

(3) Such other information as the Secretary determines to be appropriate.

(d) ADDITIONAL CONTENTS OF APPLICATION.—In order to receive a grant under this section, an applicant must meet the following conditions:

(1) The applicant furnishes the following services:

(A) Diagnosis and treatment of simple illnesses and minor injuries.

(B) Preventive health services, including health screenings.

(C) Enabling services, as defined in section 3461(g).

(D) Referrals and followups in situations involving illness or injury.

(E) Health and social services, counseling services, and necessary referrals, including referrals regarding mental health and substance abuse.

(F) Such other services as the Secretary determines to be appropriate.

(2) The applicant maintains agreements with all regional and corporate alliance health plans offering services in the applicant's service area.

(3) The applicant is a participating provider in the State's program for medical assistance under title XIX of the Social Security Act.

(4) The applicant does not impose charges on students or their families for services (including collection of any cost-sharing for services under the comprehensive benefit package that otherwise would be required).

(5) The applicant has reviewed and will periodically review the needs of the population served by

the applicant in order to ensure that its services are accessible to the maximum number of school age children and youth in the area, and that, to the maximum extent possible, barriers to access to services of the applicant are removed (including barriers resulting from the area's physical characteristics, its economic, social and cultural grouping, the health care utilization patterns of children and youth, and available transportation).

(6) In the case of an applicant which serves a population that includes a substantial proportion of individuals of limited English speaking ability, the applicant has developed a plan to meet the needs of such population to the extent practicable in the language and cultural context most appropriate to such individuals.

(7) The applicant will provide non-Federal contributions toward the cost of the project in an amount determined by the Secretary.

(8) The applicant will operate a quality assurance program consistent with section 3684(e)(6).

(e) DURATION OF GRANT.—A grant under this section shall be for a period determined by the Secretary.

(f) REPORTS.—A recipient of funding under this section shall provide such reports and information as are required in regulations of the Secretary.

SEC. 3686. FEDERAL ADMINISTRATIVE COSTS.

Of the amounts made available under section 3681, the Secretary may reserve not more than 5 percent for administrative expenses regarding this subpart.

Subpart B—Capital Costs of Developing Projects

SEC. 3691. LOANS AND LOAN GUARANTEES REGARDING PROJECTS.

(a) IN GENERAL.—The Secretary may make loans to, and guarantee the payment of principal and interest to Federal and non-Federal lenders on behalf of, State health agencies and local community partnerships for the capital costs of developing projects in accordance with subpart A.

(b) APPLICABILITY OF CERTAIN PROVISIONS.—The provisions of subpart A apply to loans and loan guarantees under subsection (a) to the same extent and in the same manner as such provisions apply to grants under subpart A. Except for any provision inconsistent with the purpose described in subsection (a), the provisions of subpart C of part 2 of subtitle E apply to loans and loan guarantees under subsection (a) to the same extent and in the same manner as such provisions apply to loans and loan guarantees under section 3441.

SEC. 3692. FUNDING.

Amounts available to the Secretary under section 3412 for the purpose of carrying out subparts B and C of part 2 of subtitle E are, in addition to such purpose, available to the Secretary for the purpose of carrying out this subpart.

Subtitle H—Public Health Service Initiative

SEC. 3701. PUBLIC HEALTH SERVICE INITIATIVE.

(a) IN GENERAL.—There is established pursuant to this title a Public Health Service Initiative consisting of the total amounts authorized and described in subsection (b). The Initiative includes the programs of subtitles C through G of this title and the programs of subtitle D of title VIII.

(b) TOTAL OF THE AMOUNTS AUTHORIZED TO BE APPROPRIATED.—The following is the total of the amounts authorized to be appropriated for the Initiative under the previous subtitles of this title:

(1) For fiscal year 1995, $1,125,000,000.

(2) For fiscal year 1996, $2,984,000,000.

(3) For fiscal year 1997, $3,830,000,000.

(4) For fiscal year 1998, $4,205,000,000.

(5) For fiscal year 1999, $4,055,000,000.

(6) For fiscal year 2000, $3,666,000,000.

(c) USE OF AMOUNTS; AVAILABILITY.—