

State Profiles FISCAL YEAR 2015



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In Fiscal Year 2015,¹ the state of Alabama received:

- Division of Adolescent and School Health funds totaling \$60,000
- Personal Responsibility Education Program funds totaling \$806,173
- Title V State Abstinence Education Program funds totaling \$1,158,817

In Fiscal Year 2015, local entities in Alabama received:

- Tribal Personal Responsibility Education Program funds totaling \$138,172

SEXUALITY EDUCATION LAW AND POLICY

STATE LAW

Alabama state law does not require the teaching of sexuality education; however, a resolution adopted by the Board of Education in 1987 does require that students in grades 5–12 receive instruction about AIDS through a health education program.² Should schools choose to offer additional sex education, [Alabama State Code Section 16-40A-2](#) sets minimum requirements for what must be taught, but specific content is developed locally. Among other things, the code requires “sex education or the human reproductive process” classes to teach students that:

- 1) abstinence from sexual intercourse is the only completely effective protection against unwanted pregnancy, sexually transmitted diseases (STDs), and acquired immune deficiency syndrome (AIDS) when transmitted sexually.
- 2) abstinence from sexual intercourse outside of lawful marriage is the expected social standard for unmarried school-age persons.³

The code also states that:

- B) course materials and instruction that relate to sexual education or sexually transmitted diseases should be age-appropriate;
- C) course materials and instruction that relate to sexual education or sexually transmitted diseases should include all of the following elements:
 2. An emphasis on the importance of self control and ethical conduct pertaining to sexual behavior.
 3. Statistics based on the latest medical information that indicates the degree of reliability and unreliability of various forms of contraception, while also emphasizing

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the increase in protection against pregnancy and protection against STDs, including HIV and AIDS, afforded by the use of various contraceptive measures...

8. An emphasis, in a factual manner and from a public health perspective, that homosexuality is not a lifestyle acceptable to the general public and that homosexual conduct is a criminal offense under the laws of the state.⁴

Parents or guardians may remove their children from sexuality education and/or STD, including HIV, education classes. [This is referred to as an “opt-out” policy.](#)

STATE STANDARDS

In addition to this code, [Alabama Course of Study: Health Education](#) provides the foundation for the minimum content requirements for topics such as HIV, STDs, and pregnancy prevention. The sexuality topics covered include; “societal expectations of remaining abstinent until married;” the “physical, social, and emotional effects” of STDs; disease transmission; responsible decision making; and refusal skills, among others.⁵

STATE LEGISLATIVE ACTIVITY

SIECUS tracks all state legislative session activity in our State Legislative Reports. For more information on bills related to school-based sexuality education that were introduced or passed in 2015, please see [SIECUS' 2015 Sex Ed State Legislative Report: Top Topics and Takeaways.](#)

YOUTH SEXUAL HEALTH DATA

The following sexual health behavior and outcome data represent the most recent information available on adolescent sexual health in Alabama. While data can be a powerful tool to demonstrate the sexuality education and sexual health care needs of young people, it is important to be mindful that these behaviors and outcomes are impacted by systemic inequities present in our society that can and often do affect an individual's sexual health and wellbeing. Additionally, there are significant limitations as to how and what data is currently collected. Young people are more than outcomes; for advocates, it is important to utilize this data in a manner that tracks our progress and pushes policies forward in a way that respects and supports the dignity of all young lives.

ALABAMA YOUTH RISK BEHAVIOR SURVEY (YRBS) DATA⁶

- In 2015, 43.6% of female high school students and 49.5% of male high school students in Alabama reported ever having had sexual intercourse, compared to 39.2% of female high school students and 43.2% of male high school students nationwide.
- In 2015, 3.8% of female high school students and 10.4% of male high school students in Alabama reported having had sexual intercourse before age 13, compared to 2.2% of female high school students and 5.6% of male high school students nationwide.
- In 2015, 34.9% of female high school students and 34.8% of male high school students in Alabama reported being currently sexually active (defined as having had sexual intercourse in the three months prior to the survey), compared to 29.8% of female high school students and 30.3% of male high school students nationwide.

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- In 2015, 13.9% of female high school students and 8.4% of male high school students in Alabama who dated in the 12 months prior to the survey reported one or more incidents of physical dating violence during that time period (including being hit, slammed into something, or injured with an object or weapon on purpose), compared to 11.7% of female high school students and 7.4% of male high school students nationwide.
- In 2015, 13.4% of female high school students and 6.1% of male high school students in Alabama who dated in the 12 months prior to the survey reported one or more incidents of sexual dating violence during that time period (including kissing, touching, or being physically forced to have sexual intercourse when they did not want to), compared to 15.6% of female high school students and 5.4% of male high school students nationwide.

Visit the Centers for Disease Control and Prevention's (CDC) [Youth Online](#) database for additional information on sexual behaviors.

ALABAMA TEEN PREGNANCY, HIV/AIDS, AND OTHER STD DATA

Teen Pregnancy, Birth, and Abortion

- In 2011, Alabama's teen pregnancy rate ranked 14th in the United States, with a rate of 59 pregnancies per 1,000 young women ages 15–19, compared to the national rate of 52 per 1,000.⁷ There were a total of 9,490 pregnancies among young women ages 15–19 reported in Alabama in 2011.⁸
- In 2014, Alabama's teen birth rate ranked 10th in the United States, with a rate of 32 births per 1,000 young women ages 15–19, compared to the national rate of 24.2 per 1,000.⁹ There were a total of 5,009 live births to young women ages 15–19 reported in Alabama in 2014.¹⁰
- In 2011, Alabama's teen abortion rate ranked 31st in the United States, with a rate of 9 abortions per 1,000 young women ages 15–19, compared to the national rate of 14 per 1,000.¹¹ There were a total of 1,420 abortions among young women ages 15–19 reported in Alabama in 2011.¹²

HIV and AIDS

- In 2014, the rate of diagnoses of HIV infection among adolescents ages 13–19 in Alabama was 8.9 per 100,000, compared to the national rate of 6.3 per 100,000.¹³
- In 2014, the rate of AIDS diagnoses among adolescents ages 13–19 in Alabama was 0.6 per 100,000, compared to the national rate of 0.9 per 100,000.¹⁴
- In 2014, the rate of diagnoses of HIV infection among young adults ages 20–24 in Alabama was 50 per 100,000, compared to the national rate of 34.4 per 100,000.¹⁵
- In 2014, the rate of AIDS diagnoses among young adults ages 20–24 in Alabama was 9 per 100,000, compared to the national rate of 6.4 per 100,000.¹⁶

Sexually Transmitted Diseases (STDs)

- In 2014, Alabama ranked ~~fourth~~ 4th in the United States for reported cases of chlamydia among young people ages 15–19, with an infection rate of 2,771.4 cases per 100,000, compared to the

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national rate of 1,804 per 100,000. In 2014, there were a total of 8,892 cases of chlamydia among young people ages 15–19 reported in Alabama.¹⁷

- In 2014, Alabama ranked ~~sixth~~ 6th in the United States for reported cases of gonorrhea among young people ages 15–19, with an infection rate of 533.9 cases per 100,000, compared to the national rate of 323.6 per 100,000. In 2014, there were a total of 1,713 cases of gonorrhea among young people ages 15–19 reported in Alabama.¹⁸
- In 2014, Alabama ranked 17th in the United States for reported cases of primary and secondary syphilis among young people ages 15–19, with an infection rate of 5 cases per 100,000, compared to the national rate of 4.8 per 100,000. In 2014, there were a total of 16 cases of syphilis among young people ages 15–19 reported in Alabama.¹⁹

Visit the Office of Adolescent Health’s (OAH) [Alabama Adolescent Health Facts](#) for additional information.

FEDERAL FUNDING FOR SEXUALITY EDUCATION, UNINTENDED TEEN PREGNANCY, HIV, AND OTHER STD PREVENTION, AND ABSTINENCE-ONLY-UNTIL-MARRIAGE PROGRAMS

FISCAL YEAR 2015 FEDERAL FUNDING IN ALABAMA

Grantee	Award
Division of Adolescent and School Health (DASH)	
Alabama Department of Health	\$60,000
TOTAL	\$60,000
Personal Responsibility Education Program (PREP)	
PREP State-Grant Program	
Alabama Department of Public Health (federal grant)	\$806,173
TOTAL	\$806,173
Tribal Personal Responsibility Education Program (Tribal PREP)	
Poarch Band of Creek Indians	\$138,172
TOTAL	\$138,172
Title V Abstinence-Only-Until-Marriage Program (Title V AOUM)	
Alabama Department of Public Health (federal grant)	\$1,158,817
TOTAL	\$1,158,817
GRAND TOTAL	\$2,163,162

DIVISION OF ADOLESCENT AND SCHOOL HEALTH

The Division of Adolescent and School Health (DASH), within the Centers for Disease Control and Prevention (CDC), provided funding to 19 state and 17 local education agencies in FY 2015. This funding helps districts and schools strengthen student health through exemplary sexual health education (ESHE)

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that emphasizes HIV and other STD prevention, increases access to key sexual health services (SHS), and establishes safe and supportive environments (SSE) for students and staff. DASH funded seven national non-governmental organizations (NGOs) to help state and local education agencies achieve these goals.

- There are no DASH grantees in Alabama funded to strengthen student health through ESHE, SHS, and SSE (1308 Strategy 2) in FY 2015.

In addition, DASH funds local education agencies and NGOs to implement multiple program activities to meet the HIV/STD prevention needs of young men who have sex with men (YMSM) and to develop strategic partnerships and collaborations between schools and community-based, mental health, and social services organizations to accomplish this work.

- There are no DASH grantees in Alabama funded to deliver YMSM programming (1308 Strategy 4) in FY 2015.

DASH also provides funding for state, territorial, and local education agencies and state health agencies to establish and strengthen systematic procedures to collect and report Youth Risk Behavior Surveillance (YRBS) and School Health Profiles data for policy and program improvements.

- There is one DASH grantee in Alabama funded to collect and report YRBS and School Health Profiles data (1308 Strategy 1) in FY 2015, the Alabama Department of Health (\$60,000).

TEEN PREGNANCY PREVENTION PROGRAM

The Teen Pregnancy Prevention Program (TPPP) funds medically accurate and age-appropriate programs to reduce teen pregnancy. The U.S. Department of Health and Human Services' (HHS) OAH administers the grant program, which totaled \$101 million in annually appropriated funding for fiscal year (FY) 2015. A total of 84 states, cities, non-profits, school districts, universities, community-based, and tribal organizations were funded for five-year cooperative agreements in 33 states and territories, including the District of Columbia and the Marshall Islands. OAH provides program support, implementation evaluation, and technical assistance to grantees and receives an additional \$6.8 million in funding for evaluation purposes. The five TPPP funding tiers include:

Tier 1A: Capacity building to support replication of evidence-based TPP programs.

Tier 1B: Replicating evidence-based TPP programs to scale in communities with the greatest need.

Tier 2A: Supporting and enabling early innovation to advance adolescent health and prevent teen pregnancy.

Tier 2B: Rigorous evaluation of new or innovative approaches to prevent teen pregnancy.

Tier 2C: Effectiveness of TPP programs designed specifically for young males.

- There are no TPPP grantees in Alabama.

PERSONAL RESPONSIBILITY EDUCATION PROGRAM

The HHS Administration for Children and Families' (ACF) Family and Youth Services Bureau (FYSB) administers the Personal Responsibility Education Program (PREP) which includes \$55 million for the state-grants program; \$10 million for local entities through the Personal Responsibility Education Innovative Strategies (PREIS) program; and \$3.1 million for Tribal PREP, for tribes, and tribal organizations. In addition, provisions within the statute for PREP enable a competitive application process for community- and faith-based organizations within states and territories that do not directly seek PREP state-grants to apply for funding. These Competitive PREP (CPREP) grants were awarded to organizations

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in five states and three territories in FY 2015. Details on the state-grants, PREIS, Tribal PREP, and CPREP are included below.

PREP State-Grant Program

State-grant PREP supports evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Forty-five states, the District of Columbia, Puerto Rico, the Federated States of Micronesia, and the Virgin Islands received PREP state-grant funds in FY 2015. The grant does not require states to provide matching funds. Funded programs must discuss abstinence and contraception and place substantial emphasis on both. Programs must also address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- The Alabama Department of Public Health received \$806,173²⁰ in federal PREP funds for FY 2015.
- The department provides sub-grants to five local public and private entities. The sub-grantee information is listed below.²¹

Sub-grantee	Serving	Amount
100 Black Men of Greater Montgomery	See narrative below	\$70,000
AIDS Alabama	See narrative below	\$35,000
Birmingham AIDS Outreach	See narrative below	\$25,000
Public Health Area I	See narrative below	\$175,000
Tuscaloosa County Health Department	See narrative below	\$175,000

The Alabama PREP state-grant program serves young people ages 13–19, with a focus on those that are high-risk, vulnerable for pregnancies, or otherwise have special circumstances, including youth in or aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant youth under 20, mothers under 20, and youth residing in areas with high birth rates for youth. Programming is administered in community-based settings in Colbert, Franklin, Jefferson, Lauderdale, Montgomery, Pickens, and Tuscaloosa counties. Alabama PREP state-level staff determined the three subjects for the adulthood preparation requirement: adolescent development, healthy life skills, and healthy relationships.

Funded programs utilize the following curricula: [Love Notes](#), [Making Proud Choices](#), [17 Days \(formerly known as What Could You Do?\)](#), [Sexual Health and Adolescent Risk Prevention \(SHARP\)](#), and [Money Habitudes](#).²²

Personal Responsibility Education Innovative Strategies (PREIS)

PREIS supports research and demonstration programs to develop, replicate, refine, and test innovative models for preventing unintended teen pregnancy. FYSB administers the grant program in collaboration with OAH.

- There are no PREIS grantees in Alabama.

Tribal Personal Responsibility Education Program (Tribal PREP)

Tribal PREP supports the development and implementation of teen pregnancy prevention programs within tribes and tribal communities. Tribal PREP programs target young people ages 10–19 who are in or are aging out of foster care, homeless youth, youth with HIV/AIDS, pregnant and/or parenting youth who are under 21 years of age, and youth who live in areas with high adolescent birth rates. Programs must address at least three of the following adulthood preparation subjects: healthy relationships, positive adolescent

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development, financial literacy, parent-child communication skills, education and employment skills, and healthy life skills.

- In FY 2015, 15 tribes and tribal organizations from nine states received a total of \$3,063,079.
- The Poarch Band of Creek Indians received \$138,172 in Tribal PREP funds for FY 2015.

THE POARCH BAND OF CREEK INDIANS, \$138,172 (FY 2015)

The Education Department of the Poarch Band of Creek Indians, located in Atmore, Alabama, administers many federal grants including the Tribal PREP grant. The department is dedicated to “further develop and improve the basic education skills of adult tribal members; upgrade and improve the academic performance of eligible Indian children; provide on-site work experience within tribal operations; provide support for academic and technical training for eligible participants.”²³ The department uses their federal grants to provide services including a student support services program, tutoring, summer programs, tuition assistance programs, library services, financial counseling, and external scholarships and programs.²⁴

Competitive Personal Responsibility Education Program (CPREP)

CPREP grants support evidence-based programs that provide young people with medically accurate and age-appropriate information for the prevention of unintended pregnancy, HIV/AIDS, and other STDs. Organizations and institutions in states and territories that did not apply for PREP state-grants in either of the first two fiscal years after PREP’s passage were eligible to submit competitive applications for CPREP grants. Twenty grants, totaling \$10 million, were awarded in FY 2015 to 20 organizations in Florida, Indiana, North Dakota, Texas, and Virginia, as well as American Samoa, Guam, and the Northern Mariana Islands.

- Alabama receives PREP state-grant funding, therefore entities in Alabama are not eligible for CPREP.

TITLE V STATE ABSTINENCE EDUCATION GRANT PROGRAM

The Title V state abstinence education grant program for abstinence-only-until-marriage (AOUM) programming, hence referred to as the Title V AOUM program, is administered by FYSB within ACF of HHS, and was funded at \$50 million in FY 2015. The Title V AOUM program requires states to provide three state-raised dollars, or the equivalent in services, for every four federal dollars received. The state match may be provided in part or in full by local groups. All programs funded by Title V AOUM must promote abstinence from sexual activity as their exclusive purpose and may provide mentoring, counseling, and adult supervision toward this end. Programs must be medically accurate and age-appropriate and must ensure abstinence is an expected outcome.

- The Alabama Department of Public Health received \$1,158,817 in federal Title V AOUM funding for FY 2015.²⁵
- The department provides sub-grants to three local public and private entities. The sub-grantee information is listed below.²⁶
- In Alabama, the match is provided through in-kind support from the sub-grantees.

Sub-grantee	Setting	Amount
Aim for Hope/Abstinence in Motion Project	See narrative below	\$148,000
Crittenton Youth Services	See narrative below	\$168,860
Teens Getting Involved for the Future—Auburn University	See narrative below	\$341,913

The state’s Title V AOUM program provides instruction to sixth and seventh grade students in a school-based setting and utilizes high school-aged students as teen leaders. Programming takes place in the

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following counties: Barbour, Bullock, Butler, Chambers, Choctaw, Coffee, Conecuh, Crenshaw, Dallas, Dekalb, Escambia, Hale, Marengo, Marion, Marshall, Mobile, Monroe, Pike, Tuscaloosa, and Wilcox. Sub-grantees are required to implement the [Managing Pressures before Marriage \(MPM\)](#) curriculum and in addition also use [Relationship Smarts Plus \(RS+\)](#), [Media Madness \(MM\)](#), and a module on STDs.²⁷

COMPETITIVE ABSTINENCE EDUCATION GRANT PROGRAM

Administered by FYSB within ACF of HHS, the competitive abstinence education (CAE) grant program provides grants for AOUM programs, “abstinence education” as defined by the A–H statute in Title V of the Social Security Act, as well as for mentoring, counseling, and adult supervision that promotes abstinence outside of marriage. As implemented by ACF, the programs must also be medically accurate. In FY 2015, \$4.6 million was granted through a competitive application process to 10 grantees across nine states and the District of Columbia.

- There are no CAE grantees in Alabama.

POINTS OF CONTACT

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¹ This refers to the federal government’s fiscal year, which begins on October 1 and ends on September 30. The fiscal year is designated by the calendar year in which it ends; for example, FY 2015 began on October 1, 2014, and ended on September 30, 2015.

² *Alabama Course of Study: Health Education* (Birmingham, AL: Alabama Department of Education, 2009), www.shelbyed.k12.al.us/instruction/doc/health_cos.pdf. No text for the 1987 Resolution to Provide Information to Students to Prevent the Spread of Acquired Immune Deficiency Syndrome Disease in the Public Schools of Alabama available online.

³ Ala. Code §§ 16-40A-2(a)(1) and (2), <http://alisondb.legislature.state.al.us/alison/codeofalabama/1975/16-40A-2.htm>

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⁴ Ala Code § 16-40A-2(b); Ala. Code §§ 16-40A-2(c)(1)–(2), (8). Regarding the provision that students must be informed that homosexual conduct is a criminal offense, the United States Supreme Court handed down a decision in *Lawrence v. Texas* that declared state laws criminalizing homosexual behavior to be unconstitutional in 2003, <http://alisondb.legislature.state.al.us/alison/codeofalabama/1975/16-40A-2.htm>.

⁵ *Alabama Course of Study: Health Education* (Birmingham, AL: Alabama Department of Education, 2009), www.shelbyed.k12.al.us/instruction/doc/health_cos.pdf.

⁶ Kann, Laura, et al., “Youth Risk Behavior Surveillance—United States, 2015,” *Morbidity and Mortality Weekly Report*, Vol. 65, No. 6 (June 10, 2016), www.cdc.gov/healthyyouth/data/yrbs/pdf/2015/ss6506_updated.pdf.

⁷ Kost, K., and I. Maddow-Zimet, *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

⁸ *Ibid.*, Table 1.2.

⁹ Hamilton, B.E., et al., *Births: Final Data for 2014*. National Vital Statistics Reports, Vol. 64, No. 1 (December 23, 2015), www.cdc.gov/nchs/data/nvsr/nvsr64/nvsr64_12.pdf, Table 12.

¹⁰ Centers for Disease Control and Prevention, VitalStats Interactive Data Tables, Hyattsville, MD: National Center for Health Statistics, www.cdc.gov/nchs/data_access/vitalstatsonline.htm.

¹¹ Kost, K., and I. Maddow-Zimet, *U.S. Teenage Pregnancies, Births, and Abortions, 2011: State Trends by Age, Race, and Ethnicity* (New York: Guttmacher Institute, 2014), www.guttmacher.org/sites/default/files/report_pdf/us-teen-pregnancy-state-trends-2011_4.pdf, Table 1.1.

¹² *Ibid.*, Table 1.2.

¹³ Slide 9: “Rates of Diagnosis of HIV Infection among Adolescents Aged 13–19 Years, 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2014.pdf.

¹⁴ Slide 18: “Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 13–19 Years with HIV Infection, 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2014.pdf.

¹⁵ Slide 10: “Rates of Diagnoses of HIV Infection among Young Adults Aged 20–24 Years, 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2014.pdf.

¹⁶ Slide 19: “Rates of Stage 3 (AIDS) Classifications among Adolescents Aged 20–24 Years with HIV Infection, 2014—United States and 6 Dependent Areas,” *HIV Surveillance in Adolescents and Young Adults* (Atlanta, GA: Centers for Disease Control and Prevention), www.cdc.gov/hiv/pdf/library/slidesets/cdc-hiv-surveillance-adolescents-young-adults-2014.pdf.

¹⁷ NCHHSTP Atlas, “STD Surveillance Data” (Atlanta, GA: Centers for Disease Control and Prevention), <http://gis.cdc.gov/GRASP/NCHHSTPAtlas/main.html>.

¹⁸ *Ibid.*

¹⁹ *Ibid.*

²⁰ Alabama reported receiving \$761,475 in federal PREP funds for FY 2015.

²¹ Information provided by Leigh Sanders, J.D., Director, Adolescent Pregnancy Prevention Branch, Women and Children’s Health Division, Bureau of Family Health Services, Alabama Department of Public Health, May 5, 2016.

²² *Ibid.*

²³ “Education,” The Poarch Band of Creek Indians, <http://pci-nsn.gov/westminster/education.html#scholarships>.

²⁴ *Ibid.*

²⁵ Alabama reported receiving \$836,293 in federal Title V AOUM funding for FY 2015.

²⁶ Information provided by Leigh Sanders, J.D., Director, Adolescent Pregnancy Prevention Branch, Women and Children’s Health Division, Bureau of Family Health Services, Alabama Department of Public Health, May 5, 2016.

²⁷ *Ibid.*