

Erin Conner

From: mailinglist@capitol.hawaii.gov
Sent: Friday, February 04, 2011 2:50 PM
To: EDU Testimony
Cc: LionEntHI@aol.com
Subject: Testimony for SB922 on 2/4/2011 2:45:00 PM

Testimony for EDU/HTH 2/4/2011 2:45:00 PM SB922

Conference room: 225
Testifier position: oppose
Testifier will be present: Yes
Submitted by: Lleander Jung
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Submitted on: 2/4/2011

Comments:

I came across a spelling test given to my daughter when she was in the fifth grade i.e. 11 to 12 years old students and as she is now 28 years old, this test was given about 16 years ago. She was asked to spell words like clitoris, testicles, vagina, fallopian tube etc. I cannot remember then what the male organ was called which she was to spell. Is that appropriate for a 5 th grader? If I ask the Committee members separately, I think I will obtain more than one opinion.

Having said that, I am generally in agreement with the intent of this Comprehensive Sexual Education bill SB922 to include the underlined portions of the bill. However, there are several portions of the bill which are as yet vague and I would like to ask the legislature to look closely at the language by deferring decision on allowing this bill to proceed. For instance, Section 2 g), indications are that students can opt out of any sections provided parents/legal guardians write a request. Since we know in reality parents will be neglectful of writing their objections due to time or work constraints, I would like to suggest that ALL parents be required at the beginning of the School year to sign the pages on the Sexuality curriculum details which should provide date information on when a particularly controversial topic will be discussed. At that point, the parent/guardian will also sign the sections of the discussion that they would like to sit in at and/or to excuse their child who will then for the purpose of supervision be in the School's health room or library or a place where they are supervised.

Section 2 h) Being that the topic of Sexual Education is such a sensitive one, minimum education and training qualifications for sexuality education teachers will result in poorly educated children.

It would be more appropriate as in the example of training of Doctors, who are to be Gynecologists, or Pediatric that the expertise should be provided by specially trained doctors in those field. Similarly, psychologists, marriage and relationship counselors whose work include counseling broken families & relationships and teens, should be teaching about the responsible purposes of sex and lead discussions to teach them how to think. This bill needs more work with and I respectfully because of time constraints request that more discussion time be provided and the bill SB 922 be deferred until more people can testify.

The consequences of hurrying a bill through without further thought can be more disastrous as in the saying "A little knowledge is a dangerous thing";

Respectfully submitted,
Lleander Jung



February 4, 2011

To: Committee on Health and
Committee on Education

From: Jeanne Y. Ohta, Co-Chair

Re: SB 922 Relating to Health
Hearing: Friday, February 04, 2011, 2:45 p.m., Room 225

Position: Support

Good afternoon Chair Tokuda, Vice Chair Kidani, Chair Green, Vice Chair Nishimura and members of the committees. I am Jeanne Ohta, Co-Chair of the Hawaii State Democratic Women's Caucus testifying today in support of SB 922 which requires that public schools in Hawaii offer students sex education that is age appropriate, medically accurate and comprehensive; and sets up mechanisms to ensure that sex education curriculums are implemented and comply with Hawaii's existing laws regarding sexual health education.

The purpose of SB 922 is to ensure that all students receive effective sex education. This bill to be a crucial step toward ensuring the health and safety of Hawaii's youth.

The Hawai'i State Democratic Women's Caucus is a catalyst for progressive, social, economic, and political change through action on critical issues facing Hawai'i's women and girls. It is in keeping with our mission that we support the provision of comprehensive sexuality health education.

Hawaii's youth deserve the best and most effective sex education. Earlier this year, the Hawaii Youth Risk Behavior Survey revealed more disturbing data. It found that the rate of teens participating in sexual intercourse increased in 2009.¹ Less than half—only 47%—of all teens are using condoms.² That's the lowest rate of condom use in the United States. As a result, we see high rates of teen pregnancy and sexually transmitted diseases. Hawaii has the 17th highest teen pregnancy rate in the country:³ and Hawaii has the nation's 6th highest rate of Chlamydia infection.⁴

Department of Education (DOE) Benchmarks require that students receive some form of sexual health education in elementary (grade 5), middle school (grade 7) and high school. For some students this

¹ Youth Risk Behavior Survey, Hawaii 2009 Results, Centers for Disease Control and Prevention, accessed from <http://apps.nccd.cdc.gov/youthonline/App/Results.aspx?LID=HI> on September 14, 2010.

² Id.

³ US Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity, January 2010, accessed from <http://www.guttmacher.org/pubs/USTPtrends.pdf> on January 29, 2010

⁴ Id.

means that they receive in-depth, accurate and effective sexual health education at least three times between the ages of 11 and 18. However, there is little consistency and accountability between schools.

Ensuring that Hawaii's youth receives comprehensive and accurate sexual health education not only reduces our rates of sexually transmitted diseases and teen pregnancy, but empowers our youth with the necessary tools they need to keep themselves safe and healthy.

Thank you for hearing this measure and the opportunity to provide testimony. We urge the committees to pass this measure.