



STATE OF HAWAII
DEPARTMENT OF EDUCATION
P.O. BOX 2360
HONOLULU, HAWAII 96804

Date: 02/13/2013

Committee: House Education

Department: Education

Person Testifying: Kathryn S. Matayoshi, Superintendent of Education

Title of Bill: HB 0399 RELATING TO HEALTH

Purpose of Bill: Specifies additional elements of Hawaii's existing sexuality health education law and its implementation. Requires the department of education to provide certain types of information to the public and to parents. Allows parents to opt out of the department of education's sexuality health education.

Department's Position:

The Department of Education (Department) opposes HB 0399. This bill attempts to legislate curriculum content that is better left to the Department and the Board of Education to determine within their constitutional authority to formulate statewide educational policy.

The Department provides comprehensive medically-accurate sex education in the classroom based on the Hawaii Content and Performance Standards (HCPS) for Health Education in alignment with Board of Education (Board) Policy 2110 – Abstinence-Based Education. The Department also collaborates and consults with the Department of Health on sexuality health education on a regular basis.

The HCPS for Health Education are identified by grade level, kindergarten through grade 12, and includes age-appropriate curricula covering: Core Concepts, Accessing Information, Analyzing Influences, Decision-Making, Goal-Setting, Interpersonal Communication, Self Management, and Advocacy. The HCPS Health Education Standards and Benchmarks are accessible to the public at <http://standardstoolkit.k12.hi.us/index.html>.

The Department's Curriculum Framework for Health Education requires a periodic review of nationally recognized, research-based curriculum materials and a compiled list of recommended textbooks and other instructional materials for select curricular areas. Educational specialists research, develop, and maintain research-based best practices in all content areas, including health education. The Department also offers professional development workshops during the school year.

The Department's standard of practice already allows a parent or guardian to submit a written request to exempt their child from sexual education instruction.

Additionally, the Hawaii Teacher Standards Board requires candidates to meet licensure requirements. Licensure requirements and teacher employment criteria describe minimum education and training requirements for health education teachers.

HAWAII
STATE
COMMISSION
ON THE
STATUS
OF
WOMEN



Chair
LESLIE WILKINS

COMMISSIONERS:

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ADRIENNE KING
CARMILLE LIM
AMY MONK
LISA ELLEN SMITH
CAROL ANNE PHILIPS

Executive Director
Catherine Betts, JD

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February 13, 2013

Testimony in Support of HB 399, Relating to Health

To: Representative Roy M. Takumi, Chair
Representative Takashi Ohno, Vice Chair
Members of the House Committee on Education

From: Cathy Betts, Executive Director, Hawai'i State Commission on the Status of Women

Re: Testimony in Support of HB 399, Relating to Health

On behalf of the Hawai'i State Commission on the Status of Women, I would like to thank the committee for this opportunity to provide testimony. Although the Department of Education (DOE) benchmarks require that students receive some form of sexual health education in elementary, intermediate and high school, there is little consistency between schools. While some schools provide in depth, accurate and effective sexual health education, some schools do not. HB 399 would create further specificity in the law to ensure greater consistency in the DOE's provision of sexual health education.

Hawai'i has one of the highest teen pregnancy rates (ranking 17th in the nation), the 8th highest rate of chlamydia infection, and the one of the lowest rates of condom use. According to data culled from the Hawai'i Youth Risk Behavior Survey (2011), 37% of teens surveyed were sexually active, 5% had sexual intercourse before the age of 13 years, 56% did not use a condom during last sexual intercourse and 79% used no birth control at all during their last sexual intercourse.¹ According to the National Campaign to Prevent Teen Pregnancy, teens that receive comprehensive sex education are more likely to delay sexual activity, to use contraceptives when they do become sexually active and to have fewer partners.² Providing comprehensive and medically accurate sexual health education empowers our youth to make healthy decisions in their lives.

HB 399 requires that all schools in the DOE provide age appropriate, medically accurate and comprehensive sexual health education. This bill further specifies that information provided would help students develop skills in critical thinking and problem solving, in addition to educating students about healthy relationships based on mutual respect and free from violence, coercion and intimidation. These are vitally important lessons for our youth to learn. They deserve to have medically accurate and comprehensive information to assist them in safe and healthy decision-making. The Commission urges this Committee to pass HB 399

Sincerely,

Cathy Betts
Executive Director
Hawai'i State Commission on the Status of Women

¹ Centers for Disease Control and Prevention, *HIV, Other STD, and Teen Pregnancy Prevention and Hawaii Students, Hawaii Youth Risk Behavior Survey* (2011).

² National Campaign to Prevent Teen Pregnancy, *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy* (2001).

HAWAII YOUTH SERVICES NETWORK

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Web site: <http://www.hysn.org> E-mail: info@hysn.org

Daryl Selman, President
Judith F. Clark, Executive Director
Aloha House
American Civil Liberties Union of Hawaii
Bay Clinic, Inc.
Big Brothers Big Sisters of Honolulu
Big Island Substance Abuse Council
Blueprint for Change
Bobby Benson Center
Catholic Charities Hawaii
Child and Family Service
Coalition for a Drug Free Hawaii
Domestic Violence Action Center
EPIC, Inc.
Family Support Hawaii
Hale Kipa, Inc.
Hale 'Opio Kauai, Inc.
Hawaii Behavioral Health
Hawaii Student Television
Healthy Mothers Healthy Babies Coalition
Hina Mauka Teen Care
Hui Malama Learning Center
Kahi Mohala Behavioral Health
KEY (Kualoa-Heeia Ecumenical Youth)
Project
Kids Hurt Too
Kokua Kalihi Valley
Life Foundation
Marimed Foundation
Maui Youth and Family Services
Palama Settlement
P.A.R.E.N.T.S., Inc.
Parents and Children Together (PACT)
Planned Parenthood of Hawaii
REAL
Salvation Army Family Intervention Svcs.
Salvation Army Family Treatment Svcs.
Sex Abuse Treatment Center
Susannah Wesley Community Center
The Catalyst Group
The Children's Alliance of Hawaii
Waikiki Health Center
Women Helping Women
YWCA of Kauai

January 30, 2013

To: Representative Roy Takumi, Chair,
And members of the Committee on Education

Testimony in Support of the Intent of HB 399 Relating to Health

Hawaii Youth Services Network (HYSN), a statewide coalition of youth-serving organizations, strongly supports HB 399 Relating to Health

Hawaii's communities benefit when our youth have the knowledge, skills, and resources to make healthy decisions about their sexual and reproductive health.

Because we have not yet committed the resources to ensure that our young people grow up sexually safe and healthy, Hawaii has the 17th highest rate of teen pregnancy in the United States. Each year, more than 1,500 teenage girls give birth in Hawaii.

Young women who give birth in their teens and their children face many challenges. At age 22, only half of teen mothers have graduated from high school compared to 90% of their peers who did not give birth as teens. Eighty percent (80%) receive Temporary Assistance to Needy Families Benefits (TANF) during the 10 years following the birth of the child.

The children fare less well in school, scoring lower on standardized tests of reading and math, more likely to repeat a grade, and less likely to graduate from high school than their peers. The children of teen parents have a higher rate of emergency room visits, are more likely to have chronic health conditions, and have a higher rate of child abuse and neglect.

All of this costs Hawaii taxpayers \$37 million dollars a year, 71% of it in state and local costs.

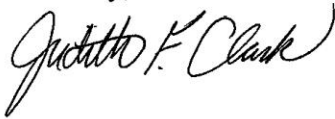
Ninety-seven percent (97%) of participants stated that it was important for Hawaii public schools to include sexual health education in their curriculum in a 2012 survey conducted by SMS Research. The majority felt that neither parents nor schools were providing a sufficient amount of sexual health information, and only half felt prepared to talk about sexual health topics with their children. The majority believed that education on most sexual health topics should begin in the middle schools, with some topics (such as anatomy, puberty, and sexual abuse) beginning in the elementary schools.

Sexual health education using age-appropriate, evidence-based curricula reduces the risk of unplanned pregnancies and sexually transmitted infections. Young people who complete these programs are more likely to practice abstinence, delay initiation of sex, have fewer sexual partners, and use protection when, and if, they begin having sex.

Everyone wants their children to they can grow up safe, healthy, and ready to succeed. We teach our children how to cross the street safely, because we know that one day they will face the risks of traffic. We also need to teach our youth how to protect themselves from the risks of unplanned pregnancy and STIs. The community supports sexual health education in our public schools, and our young people need and deserve it.

Thank you for this opportunity to testify.

Sincerely,

A handwritten signature in black ink that reads "Judith F. Clark". The signature is written in a cursive style with a large, sweeping initial "J".

Judith F. Clark, MPH
Executive Director



February 13, 2013

To: Rep. Roy Takumi, Chair
Rep. Takashi Ohno, Vice Chair and
Members of the Committee on Education

From: Jeanne Y. Ohta, Co-Chair

Re: HB 399 Relating to Health
Hearing: Wednesday, February 13, 2013, 2:00 p.m., Room 309

Position: Support

The Hawai'i State Democratic Women's Caucus writes in support of HB 399 Relating to Health which requires that public schools in Hawai'i 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 this measure is to ensure that all students receive effective sex education. This bill is a crucial step toward ensuring the health and safety of Hawaii's youth. It will not only reduce our rates of sexually transmitted diseases and teen pregnancy, but it will empower our youth with the necessary tools and knowledge they need to keep themselves safe and healthy.

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

This measure is necessary because Hawai'i has one of the highest teen pregnancy rates in the country, ranking 17th out of 51 states in 2010.ⁱ The occurrence of sexually transmitted infections is also rising. Hawai'i has the nation's 8th highest rate of Chlamydia infection, as of 2010.ⁱⁱ

The 2011 Hawai'i Youth Risk Behavior Survey revealed more disturbing data. It found that the rate of teens participating in sexual intercourse increased in 2009. Among those who were sexually active, 56% of teens were not using condoms and 79% did not use birth control.ⁱⁱⁱ Nationally, 40% of teens fail to use a condom during sexual intercourse.^{iv} Hawai'i has the lowest rate of condom use among teens in the nation.

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 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.

Sex education in our schools is supported by the public. According to the Hawai‘i Youth Services Network’s 2012 Hawai‘i Adolescent Reproductive Health survey, 97% of participants in the survey think it’s important or very important to have sex education in school. In addition, 87% of participants in the survey indicated that they support teaching other methods of preventing pregnancy and STIs in addition to abstinence. 75% believe that students should be taught how to use condoms properly.^v

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

ⁱ Guttmacher Institute, 2010. “U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity.” Accessed from <http://www.guttmacher.org/pubs/USTPtrends.pdf> on November 29, 2012.

ⁱⁱ Hawaii Department of Health. “Chlamydia Case Rate by Year: Hawaii and US, 1986-2010.” Accessed from <http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/ct%20source%20gender%202010.pdf> on November 29, 2012.

ⁱⁱⁱ Centers for Disease Control and Prevention. “HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students” Accessed from http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

^{iv} Ibid.

^v Ibid.



THE LEAGUE
OF WOMEN VOTERS OF HAWAII

February 12, 2013

Testimony in **support** of HB 399

Committee on Education
Representative Roy M. Takumi, Chair
Representative Takashi Ohno, Vice Chair

Date: Wednesday, February 13, 2013
Time: 2:00 P.M.
Place: Room 309
State Capitol

The League of Women Voters of Hawaii supports HB399 that promotes healthy decision making by providing age appropriate, medically accurate health education in the curricula of our Hawaii Schools in an ongoing and comprehensive way.

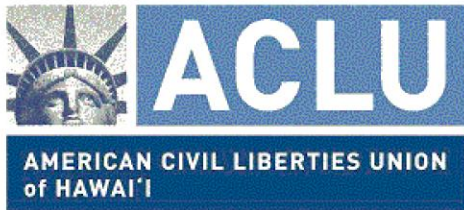
Our position on access to health care gives these students an opportunity to make an informed decision about a very important aspect of their lives that teaches respect for the important role sexuality plays throughout their lifespan.

We support this bill as it is clear that this education must be age appropriate, and medically accurate factual information. We also encourage the Department of Education to establish clear standards for the educators who will be qualified to teach these classes.

This bill does provide that parents be informed of this curricula and have an option to opt out.

Thank you for allowing me to testify in support of HB 399

Joy A Marshall, R. N.
Health Care Reform
League of Women Voters-Hawaii



Committee: Committee on Education
Hearing Date/Time: Wednesday, February 13, 2013, 2:00 p.m.
Place: Conference Room 309
Re: Testimony of the ACLU of Hawaii in Support of H.B. 399, Relating to Health

Dear Chair Takumi and Members of the Committee on Education:

The American Civil Liberties Union of Hawaii (“ACLU of Hawaii”) writes in support of H.B. 399, Relating to Health, which would provide effective sex education that gives teens the information they need to make healthy decisions about sexuality throughout their lives.

Hawaii’s youth deserve the best and most effective sex education, but they aren’t getting it.

In Hawaii, 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 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, which means that many students receive little or no sex education.

Hawaii has one of the highest teen pregnancy rates in the country, ranking 17th out of 51 states in 2010.¹ The occurrence of sexually transmitted infections is also rising. Hawaii has the nation’s 8th highest rate of Chlamydia infection, as of 2010.²

The 2011 Hawaii Youth Risk Behavior Survey revealed more disturbing data.

- It found that the rate of teens participating in sexual intercourse increased in 2009.
- Among those who were sexually active, 56% of teens were not using condoms and 79% did not use birth control.³

¹ Guttmacher Institute, 2010. “U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity.” Accessed from <http://www.guttmacher.org/pubs/USTPTrends.pdf> on November 29, 2012.

² Hawaii Department of Health. “Chlamydia Case Rate by Year: Hawaii and US, 1986-2010.” Accessed from <http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/ct%20source%20gender%202010.pdf> on November 29, 2012.

³ Centers for Disease Control and Prevention. “HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students” Accessed from http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

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- Nationally, 40% of teens fail to use a condom during sexual intercourse.⁴ ***Hawaii has the lowest rate of condom use among teens in the nation.***

H.B. 399 puts teen health and well-being first.

We all want teenagers to be safe and make healthy decisions about life. We can't be with them all the time, but we can make sure that they have the information they need to make healthy and smart decisions, including decisions about sex and sexuality. Hawaii's youth deserve the best and most effective sex education. Evidence shows that sex education that stresses the importance of waiting to have sex - while providing accurate, age-appropriate, and complete information about how to use contraceptives effectively to prevent pregnancy and sexually transmitted infections (STIs) - can help teens make healthy and responsible life decisions.⁵

Giving teens the information they need to make responsible life decisions about sex not only helps teens choose to delay sex, but also helps to protect their health.

- A nationwide study of 15-19 year olds found that teens who participated in sexuality education programs that both (a) discuss the importance of delaying sex and (b) provide information about contraceptive use were significantly less likely to report teen pregnancies than were those who received either no sex education or attended abstinence-only-until-marriage programs.⁶
- A review of 115 sex education programs found that curricula that both (a) stress waiting to have sex and (b) provide information about using contraception effectively can significantly delay the initiation of sex, reduce the frequency of sex, reduce the number of sexual partners, and increase condom or contraceptive use among teens.⁷
- The Centers for Disease Control & Prevention note that "research has clearly shown that the most effective programs to prevent the spread of HIV/AIDS are comprehensive ones that include

⁴ Ibid.

⁵ Douglas Kirby, Ph.D., *Emerging Answers 2007: Research findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*, The National Campaign to Prevent Teen and Unplanned Pregnancy, November 2007.

⁶ Pamela K. Kobler, RN, et al., *Abstinence-Only and Comprehensive Sex Education and the Initiation of Sexual Activity and Teen Pregnancy*, Journal of Adolescent Health, Spring 2008.

⁷ Douglas Kirby, Ph.D., *Emerging Answers 2007: Research findings on Programs to Reduce Teen Pregnancy and Sexually Transmitted Diseases*, The National Campaign to Prevent Teen and Unplanned Pregnancy, November 2007.

Chair Takumi and Members of the Committee on
Education
February 14, 2013
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a focus on delaying sexual behavior *and* provide information on how sexually active young people can protect themselves.”⁸

Parents and doctors support programs that discuss the importance of waiting to have sex and provide complete, accurate information about contraceptives.

According to the Hawaii Youth Services Network’s 2012 Hawaii Adolescent Reproductive Health survey, 97% of participants in the survey think it’s important or very important to have sex education in school.

- In addition, 87% of participants in the survey indicated that they support teaching other methods of preventing pregnancy and STIs in addition to abstinence.
- 75% believe that students should be taught how to use condoms properly.⁹

More than 85 percent of Americans across the country believe that it is appropriate for school-based sex education programs to teach students how to use and where to get contraceptives.¹⁰

Major medical groups, including the American Medical Association, the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, and the Society for Adolescent Medicine, support comprehensive sex education.¹¹

Thank you for this opportunity to testify.

Sincerely,
Laurie A. Temple
Staff Attorney and Legislative Program Director

⁸ Centers for Disease Control & Prevention, *Fact Sheet: Young People at Risk: HIV/AIDS Among America’s Youth*, National Center for HIV, STD and TB Prevention. March 2002.

⁹ Centers for Disease Control and Prevention. “HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students” Accessed from http://www.cdc.gov/healthyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

¹⁰ National Public Radio, Kaiser Family Foundation, and Harvard University’s Kennedy School of Government, *Sex Education in America*, January 2004.

¹¹ American Medical Association, Policy H-170.968 *Sexuality Education, Abstinence, and Distribution of Condoms in Schools*; American Academy of Pediatrics, Committee on Adolescence, *Condom Use By Adolescents* (2003); John S. Santelli et al., *Abstinence-Only Education Policies and Programs: A Position Paper of the Society of Adolescent Medicine*, 38 J. Adolescent Health 83, 84 (2006).

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Chair Takumi and Members of the Committee on
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ACLU of Hawaii

The ACLU has been the nation's guardian of liberty since 1925 and the ACLU of Hawaii since 1965 and works daily in the courts, legislatures and communities to defend and preserve the individual rights and liberties equally guaranteed to all by the Constitutions and laws of the United States and Hawaii. The ACLU works to ensure that the government does not violate our constitutional rights, including, but not limited to, freedom of speech, association and assembly, freedom of the press, freedom of religion, fair and equal treatment, and privacy. The ACLU network of volunteers and staff works throughout the islands to defend these rights, often advocating on behalf of minority groups that are the target of government discrimination. If the rights of society's most vulnerable members are denied, everyone's rights are imperiled.

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February 11, 2013

Testimony in Support: HB 399

To: Chair Roy Takumi, Vice Chair Takashi Ohno and Members of the House Committee on Education
From: Katie Reardon, Director of Public Affairs and Government Relations, Planned Parenthood of Hawaii
Re: Testimony in Support of HB 399 Relating to Health

Planned Parenthood of Hawaii (PPHI) supports HB 399 Relating to Health, and we thank the committee for hearing this bill. HB 399 requires that public schools in Hawaii offer students sex education that is age appropriate, medically accurate and comprehensive. It also sets up mechanisms to ensure that sex education curriculums are implemented and comply with Hawaii's existing laws regarding sexual health education. We find this bill to be a crucial step toward ensuring the health and safety of Hawaii's youth.

Hawaii's youth deserve the best and most effective sex education. Earlier this year, the Hawaii Youth Risk Behavior Survey revealed disturbing data. It found that of Hawaii's teens who are sexually active, 56% are not using condoms and 79% did not use birth control.¹ In addition, the data shows that the number of teens failing to use a condom during sex is steadily increasing, from 46% in 2007, to 52% in 2009, to 56% in 2011.² Nationally, 40% of teens fail to use a condom during sexual intercourse.³ Hawaii has the lowest rate of condom use among teens in the nation.

As a result, we see high rates of teen pregnancy and sexually transmitted diseases. The teen pregnancy rate was 71 per 1000 teens ages 15-19 – giving Hawaii the 17th highest teen pregnancy rate in the country.⁴ Nationally, gonorrhea rates are on the rise and other STDs such as Chlamydia and syphilis continue to significantly impact the young population.⁵ In fact, one in four new STDs occur in adolescents. And in Hawaii, a 2004 study found that youth aged 15-24 bore the highest burden, experiencing 67% of all Chlamydia infections.⁶

In 2009 Hawaii made a big step forward when it passed HRS §321-11.1, requiring that state funded sexual health programs be comprehensive and medically accurate. However, we can do more to ensure that all students receive age appropriate and effective sexual health education and receive it more often. Department of Education (DOE) Benchmarks require that students receive health education in elementary (grade 5), middle school (grade 7) and high school. For some students this means that they

¹ Centers for Disease Control and Prevention. "HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students" Accessed from http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

² Centers for Disease Control and Prevention. "Youth Online: High School YRBS." Accessed from <http://apps.nccd.cdc.gov/youthonline/App/Results.aspx?LID=HI> on December 10, 2012.

³ Ibid.

⁴ 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

⁵ American Social Health Association, "STD Statistics", www.ashastd.org

⁶ Hawaii Department of Health. "Case Rate of Reported Cases of Chlamydia, Hawai'i and US, 1986-2004." Accessed from <http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/figures/stats-chlamydia.pps> on August 15, 2008.

Honolulu Health Center

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Kailua Kona Health Center

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Kahului (Maui) Health Center

140 Ho'ohana Street, Suite 303
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(A Maui United Way Agency)

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. Too many students receive inadequate sexual health education. With no standard curriculum for sexual health, teachers are often left decide what to teach on their own.

HB 399 will help ensure that effective sexual health education is taught in all schools and proposes a system for implementation and accountability. Ensuring that Hawaii's youth receives comprehensive and accurate sexual health education will not only reduce our rates of sexually transmitted diseases and teen pregnancy, but it will empower our youth with the necessary tools they need to keep themselves safe and healthy. Accordingly, we encourage the Committees to pass HB 399. Thank you.



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Alvin Nagasako
Executive Director

TESTIMONY BEFORE THE HOUSE COMMITTEE ON EDUCATION

DATE: WEDNESDAY, FEBRUARY 13, 2013

RE: H.B. 399 – RELATING TO HEALTH

Person Testifying: WIL OKABE, PRESIDENT
HAWAII STATE TEACHERS ASSOCIATION

To The Honorable Chair Takumi and Members of the Committee:

The Hawaii State Teachers Association (HSTA) **supports the intent of HB 399**, relating to health.

HSTA is the exclusive representative of more than 13,500 public and charter school teachers statewide. As the state affiliate of the 2.2 million member National Education Association (NEA), HSTA supports the continuance of sex education in the public schools.

HSTA believes that the Department of Education should provide for and fund appropriate in-service training for all licensed staff prior to implementing new programs or enhancing existing programs and provide all the necessary materials and resources to ensure full and continuous implementation.

Thank you for the opportunity to testify.



Hawaii Women's Coalition

COMMITTEE ON EDUCATION

Rep. Roy M. Takumi, Chair

Rep. Takashi Ohno, Vice Chair

DATE: Wednesday, February 13, 2013

TIME: 2:00 p.m.

PLACE: Conference Room 309

STRONG SUPPORT FOR HB399 – Requiring comprehensive sex education in our schools

Aloha Chair Takumi, Vice Chair Ohno, Members of the Committee,

The Hawai'i Women's Coalition is in strong support of this long-overdue measure, which will promote the health and well-being of our keiki by ensuring that our youth receive the best and most effective sex education.

Consider that Hawai'i has one of the **highest teen pregnancy rates** in the country, ranking **17th** out of 51 states in 2010. The occurrence of sexually transmitted infections is also rising. Hawai'i has the nation's **8th highest rate of Chlamydia infection**, as of 2010.

The 2011 Hawai'i Youth Risk Behavior Survey revealed more disturbing data. It found that the rate of teens participating in sexual intercourse increased in 2009. Among those who were sexually active, 56% of teens were not using condoms and 79% did not use birth control. Nationally, 40% of teens fail to use a condom during sexual intercourse. Hawai'i has the lowest rate of condom use among teens in the nation. This deplorable state of affairs is due to decades of dis-information programs combined with neglect.

In Hawai'i, 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 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.

Comprehensive and medically accurate sex education provides teens the information and tools that they need to keep themselves safe and healthy and to make responsible choices. Those tools include information about abstinence, as well as contraceptives, STI's, HIV, in addition to teaching abstinence.

Requiring that Hawai'i public schools teach age-appropriate, medically accurate, and comprehensive sexual health education will not only reduce our rates of sexually transmitted diseases and teen pregnancy, but it will empower our youth with the necessary tools and knowledge they need to keep themselves safe and healthy.

Mahalo nui loa,

Ann S. Freed

Co-Chair, Hawai'i Women's Coalition

Contact: annsfreed@gmail.com

Phone: 808-623-5676

Testimony in Support: HB 399

To: Chair Roy Takumi, Vice Chair Takashi Ohno and Members of the House Committee on Education

Re: Testimony in Support of HB 399 Relating to Health

Hawaii's youth deserve the best and most effective sex education. Hawaii has one of the highest teen pregnancy rates in the country, ranking 17th out of 51 states in 2010.¹ The occurrence of sexually transmitted infections is also rising. Hawaii has the nation's 8th highest rate of Chlamydia infection, as of 2010.²

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In Hawaii, 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 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.

Comprehensive and medically accurate sex education provides teens the information and tools that they need to keep themselves safe and healthy and to make responsible choices. Those tools include information about abstinence, as well as contraceptives, STI's, HIV, in addition to teaching abstinence.

Requiring that Hawaii public schools teach age appropriate, medically accurate, and comprehensive sexual health education will not only reduce our rates of sexually transmitted diseases and teen pregnancy, but it will empower our youth with the necessary tools and knowledge they need to keep themselves safe and healthy.

Please pass HB 399. Mahalo.

¹ Guttmacher Institute, 2010. "U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity." Accessed from <http://www.guttmacher.org/pubs/USTPtrends.pdf> on November 29, 2012.

² Hawaii Department of Health. "Chlamydia Case Rate by Year: Hawaii and US, 1986-2010." Accessed from <http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/ct%20source%20gender%202010.pdf> on November 29, 2012.

³ Centers for Disease Control and Prevention. "HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students" Accessed from http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

⁴ Ibid.

To: Chair Roy Takumi, Vice Chair Takashi Ohno and Members of the House Committee on Education
From: Annie Hollis, University of Hawai'i Myron B. Thompson School of Social Work
Re: Testimony in Support of HB 399 Relating to Health

The health outcomes for youth in Hawai'i are disturbing. We have one of the highest rates of teen pregnancy in the country, ranking 17th out of 51 states in 2010—and the rates are much higher on the neighbor islands than they are on O'ahu.¹ In addition, the occurrence of sexually transmitted infections is also rising. Hawaii has the nation's 8th highest rate of Chlamydia infection, as of 2010.²

The 2011 Hawaii Youth Risk Behavior Survey revealed more disturbing data. It found that the rate of teens participating in sexual intercourse increased in 2009. Among those who were sexually active, 56% of teens were not using condoms and 79% did not use birth control.³ Nationally, 40% of teens fail to use a condom during sexual intercourse.⁴ **Hawaii has the lowest rate of condom use among teens in the nation.**

In Hawaii, 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 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. Some students are not getting the information they need to keep themselves safe and to make healthy decisions.

Comprehensive and medically accurate sex education provides teens the information and tools that they need to keep themselves safe and healthy and to make responsible choices. Those tools include information about abstinence, as well as contraceptives, STI's, HIV, in addition to teaching abstinence.

Requiring that Hawaii public schools teach age appropriate, medically accurate, and comprehensive sexual health education will not only reduce our rates of sexually transmitted diseases and teen pregnancy, but it will empower our youth with the necessary tools and knowledge they need to keep themselves safe and healthy. Sex education can also help to open the lines of communication in families to talk about these issues—it may be difficult, but having a professional to encourage a young person to talk to their family certainly helps.

Please pass HB 399. Mahalo.

¹ Guttmacher Institute, 2010. "U.S. Teenage Pregnancies, Births and Abortions: National and State Trends and Trends by Race and Ethnicity." Accessed from <http://www.guttmacher.org/pubs/USTPtrends.pdf> on November 29, 2012.

² Hawaii Department of Health. "Chlamydia Case Rate by Year: Hawaii and US, 1986-2010." Accessed from <http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/ct%20source%20gender%202010.pdf> on November 29, 2012.

³ Centers for Disease Control and Prevention. "HIV, Other STD, and Teen Pregnancy Prevention and Hawaii students" Accessed from http://www.cdc.gov/healthyyouth/yrbs/pdf/hiv/hi_hiv_combo.pdf on December 10, 2012.

⁴ Ibid.

**GAY LESBIAN
BISEXUAL AND
TRANSGENDER
CAUCUS**



**DEMOCRATIC
PARTY OF HAWAII**

Testimony in Support: HB 399

To: Chair Roy Takumi, Vice Chair Takashi Ohno
Members of the House Committee on Education

Most of us feel “lucky we live Hawai‘i”. However, by some measures, Hawai‘i is a leader in areas that are harmful to our keiki. Hawai‘i has the lowest rate of condom use among teens in the nation (44%); one of the highest teen pregnancy rates (79% - 17th in the nation in 2010); high rates of Chlamydia infection (8th in the nation in 2010).

Given these statistics, it is clear that Hawaii’s youth need effective sex education. Department of Education (DOE) benchmarks require students receive some form of sexual health education in grade 5, grade 7 and high school. However, as with many DOE policies, statewide standards are set, but implementation decisions are delegated down to the school level, resulting in little consistency and no accountability. Some students receive in-depth, accurate and effective sexual health education at least three times between the ages of 11 and 18; others receive no sex education whatsoever.

Requiring Hawaii public schools to teach age-appropriate, medically-accurate, and comprehensive sexual health education will empower our youth with the necessary tools and knowledge to make responsible choices. As shown by the statistics, if we do not teach comprehensive sex ed in the public schools, students will learn these lessons in the School of Hard Knocks.

A friend of mine, whose daughter recently graduated from an ivy-league college, said it was heartbreaking to see how many of her daughter’s high school classmates are trapped in a cycle of poverty. They got pregnant. They cannot continue their schooling. They are unable to provide for themselves and their children. It reminded me of how my older sister dropped out of college when she got pregnant at age 17; a decision that shaped her life for decades.

We owe it to our keiki to provide them with the facts, so they can make these fundamental, life-altering decisions in an intelligent and informed manner.

Please pass HB 399.

Mahalo for your consideration.

Jo-Ann M. Adams, Legislative Liaison

From: mailinglist@capitol.hawaii.gov
Sent: Monday, February 11, 2013 11:37 PM
To: EDNtestimony
Cc: mwood17@hawaii.rr.com
Subject: Submitted testimony for HB399 on Feb 13, 2013 14:00PM

HB399

Submitted on: 2/11/2013

Testimony for EDN on Feb 13, 2013 14:00PM in Conference Room 309

Submitted By	Organization	Testifier Position	Present at Hearing
Melinda Wood	Individual	Support	No

Comments: Hawaii's 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. However, across the state there is little consistency and accountability among our schools regarding sexuality education. This means that many students do not receive the in-depth, accurate and effective sexual health education mandated by the DOE. According to recent reports, Hawaii has one of the highest teen pregnancy rates in the country, ranking 17th out of 51 states in 2010. The occurrence of sexually transmitted infections is also rising. Hawaii has the nation's 8th highest rate of Chlamydia infection, as of 2010. The 2011 Hawaii Youth Risk Behavior Survey revealed more disturbing data. It found that the rate of teens participating in sexual intercourse increased in 2009. Among those who were sexually active, 56% of teens were not using condoms and 79% did not use birth control. In fact, Hawaii has the lowest rate of condom use among teens in the nation. I volunteer in the Neonatal Intensive Care Unit (NICU) at the Kapiolani Medical Center for Women and Children and I see the fallout of our currently lamentable sexual education; teen mothers and fathers who are not prepared to be parents, babies born prematurely because their mothers didn't know or didn't want to acknowledge they were pregnant, and a social system stretched even further as the state takes on the burden of young families who lack the necessary education and job skills to support themselves. Requiring that Hawaii public schools teach age appropriate, medically accurate, and comprehensive sexual health education will reduce our rates of sexually transmitted diseases and teen pregnancy, and it will empower our youth with the necessary tools and knowledge they need to keep themselves safe and healthy. Hawaii's youth need and deserve the best and most effective sex education. Please pass HB 399. Mahalo.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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Testimony in Support: HB 399

To: Chair Roy Takumi, Vice Chair Takashi Ohno
Members of the House Committee on Education

Hawai'i has the lowest rate of condom use among teens in the nation (44%); one of the highest teen pregnancy rates (79% - 17th in the nation in 2010); high rates of Chlamydia infection (8th in the nation in 2010). These statistics should be an eye opener to anyone that proper sex education is needed in our schools.

Given these statistics, it is clear that Hawaii's youth need effective sex education. Department of Education (DOE) benchmarks require students receive some form of sexual health education in grade 5, grade 7 and high school. However, as with many DOE policies, statewide standards are set, but implementation decisions are delegated down to the school level, resulting in little consistency and no accountability. Some students receive in-depth, accurate and effective sexual health education at least three times between the ages of 11 and 18; others receive no sex education whatsoever.

Our society treats sex as a taboo topic. By ignoring the situation or the problems that arise we're only enabling young children to engage in acts that they don't fully understand or fully comprehend the consequences. It's our duty to provide appropriate education our the children of our community.

Requiring Hawaii public schools to teach age-appropriate, medically-accurate, and comprehensive sexual health education will empower our youth with the necessary tools and knowledge to make responsible choices. As shown by the statistics, if we do not teach comprehensive sex ed in the public schools, students will learn these lessons in the School of Hard Knocks.

We owe it to the children of our community to provide them with the facts, so they can make these fundamental, life-altering decisions in an intelligent and informed manner.

Please pass HB 399.

Thank you for your time,
Kelsey

ohno2-Jun

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 12, 2013 6:34 AM
To: EDNtestimony
Cc: tophatandscarf@yahoo.com
Subject: Submitted testimony for HB399 on Feb 13, 2013 14:00PM

HB399

Submitted on: 2/12/2013

Testimony for EDN on Feb 13, 2013 14:00PM in Conference Room 309

Submitted By	Organization	Testifier Position	Present at Hearing
Faith Harding	Individual	Support	No

Comments: Aloha and mahalo for this act!! I have worked with an AIDS Service Organization (ASO) and I currently serve on the HI Youth Coalition. I had a program on Kauai called Condom Sense that I started and really condom accessibility in public schools is vital and needed. I find it disturbing that it's accepted at Kapaa High School that a nursery for teen mothers is available but NO CONDOMS in the nurse's or counselor's office. I hope this is the beginning of some much needed updates in sex ed. I applaud this act and hope it sees it's into a bill. Join 2013 and comprehensive sex ed. Mahalo.

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February 11, 2013

TO: Rep. Roy M. Takumi, Chair
Rep. Henry J.C. Aquino
Rep. Isaac W. Choy
Rep. Faye P. Hanohano
Rep. Linda Ichiyama
Rep. Mark M. Nakashima
Rep. K. Mark Takai
Rep. Lauren Kealohilani Cheape
Rep. Richard Lee Fale

February 13, 2013 2:00 Conference Room 309
FROM: Laura Schuetze

RE: **HB 399 Relating to Health SUPPORT**

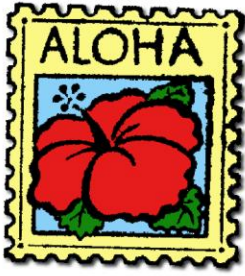
Representative Roy M. Takumi Chair, Representative Takashi Ohno Vice Chair, and members of the House of Representatives Committee on Health, I am **Laura Schuetze**. I am a Masters in Social Work student at University of Hawaii at Manoa and I value the importance of comprehensive sexual education in our schools. I strongly support **HB 399** Relating to Health.

I strongly support this bill due to the following reasons:

1. It will standardize the provision of sexual health education in our schools. Currently there is considerable variations in the provision of this important curricula.
2. It will require medically informed and comprehensive sexual health education which will help students to protect themselves from sexually transmitted infections. There are very high rates of transmission of many STIs in Hawaii including Chlamydia.
3. It will address the specific issues such as high rates of teen pregnancy in Hawaii. Hawaii has the 17th highest teen pregnancy rate in the United States.
4. It will provide information about healthy relationships which will also address the high incidence of dating violence experienced by adolescents in Hawaii.
5. Improve awareness of teenagers on issues crucial to sexual health. It will ensure that teens have appropriate access to information on contraception. This is crucial since 79% of teens do not use birth control in Hawaii.
6. It will also improve curricula for groups which are particularly vulnerable such as LGBT youth. Currently only 15% of schools provide this important information to teens.

All of our students deserve comprehensive sexual health education to enable them to make informed decisions.

I urge you to support HB399. I greatly appreciate your time and to have the opportunity to testify.



Holly J. Huber

1519 Nuuanu Ave #154 • Honolulu, Hawaii 96817

(808) 554-7692 • hollyjhuber@gmail.com

House Committees on Education

Hearing on February 13, 2013 @ 2:00 PM in Conference Room 309

HB399 RELATING TO SEXUALITY HEALTH EDUCATION

TESTIMONY IN SUPPORT

February 12, 2013

Aloha Representatives:

Mahalo for hearing HB399 to improve Hawaii's existing sexuality health education law and its implementation.

I urge you to **STRONGLY SUPPORT** this measure providing medically accurate sexuality health education.

In this age of information, our keiki should be provided with the best possible sex education.

Please vote "YES" on HB399.

Sincerely,

Holly J. Huber

ohno2-Jun

From: Lisa Smith [smith808143@yahoo.com]
Sent: Tuesday, February 12, 2013 9:21 PM
To: EDNtestimony
Subject: Support for HB399

Aloha Chair Roy Takumi and committee members.

I submit this testimony in strong support for HB399 for comprehensive sex education. Teen pregnancy costs the state a substantial amount of tax dollars and providing improve facts on sex education will allow our teens to make a better decision relating to sex. In addition, this measure allows parents to opt out of the Department of Education's sex education course work.

Thanks you for considering my testimony in support of HB399.

ohno2-Jun

From: mailinglist@capitol.hawaii.gov
Sent: Tuesday, February 12, 2013 9:26 PM
To: EDNtestimony
Cc: sminth808143@yahoo.com
Subject: Submitted testimony for HB399 on Feb 13, 2013 14:00PM

HB399

Submitted on: 2/12/2013

Testimony for EDN on Feb 13, 2013 14:00PM in Conference Room 309

Submitted By	Organization	Testifier Position	Present at Hearing
Steve Smith	Individual	Support	No

Comments: Aloha Chair Roy Takumi and committee members. I submit this testimony in strong support for HB399 for comprehensive sex education. Teen pregnancy costs the state a substantial amount of tax dollars and providing improve facts on sex education will allow our teens to make a better decision relating to sex. In addition, this measure allows parents to opt out of the Department of Education's sex education course work. Thanks you for considering my testimony in support of HB399

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ohno2-Jun

From: mailinglist@capitol.hawaii.gov
Sent: Wednesday, February 13, 2013 11:43 AM
To: EDNtestimony
Cc: mendezj@hawaii.edu
Subject: *Submitted testimony for HB399 on Feb 13, 2013 14:00PM*

HB399

Submitted on: 2/13/2013

Testimony for EDN on Feb 13, 2013 14:00PM in Conference Room 309

Submitted By	Organization	Testifier Position	Present at Hearing
Javier Mendez-Alvarez	Individual	Support	No

Comments:

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