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**WISCONSIN STATE
LEGISLATURE COMMITTEE
HEARING RECORDS**

2009-10

(session year)

Assembly

(Assembly, Senate or Joint)

**Committee on
Education**

(AC-Ed)

(FORM UPDATED: 06/28/2010)

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AB 458

(Pt. 01)

PH AB 458 & AB 461

PH

10/6/09





Weigand, Jeffrey

From: mary weigand [weigandmary@att.net]
Sent: Tuesday, October 06, 2009 8:08 AM
To: Rep.Nass; Rep.Davis; Rep.Townsend; Rep.Vukmir; Rep.Radcliffe; Rep.Nygren; Rep.Krusick;
Rep.Smith; Rep.Hixson; Rep.Hilgenberg; Rep.Dexter
Cc: weigandmary@att.net; Rep.Strachota; pastormeester@hopewb.org; Rep.LeMahieu; Sen.Grothman
Subject: Constituent Mary Weigand

Monday October 5, 2009

Dear Committee on Education,

My name is Mary Weigand and I live in West Bend, WI. I was aghast when I read AB 458, the bill regarding human growth and development curriculum in public schools. You see, this past year I was on the Human Growth and Development Committee in West Bend. We as a committee were made up of district employees including health teachers, moms, grandmothers, a pastor, and me, a nurse. We were able to impact our school's HGD curriculum and for the first time saw to it that instruction in marriage is included. In the past our state has recognized that marriage is foundational to a society and that children raised with both mom and dad will be healthier, happier, more emotionally stable, do better in school, be economically better off, and on and on. Stats backing up such claims abound.

AB 458 repeals the entire section (2m) that deals with providing instruction in marriage, presents abstinence as the preferred choice for unmarried pupils, and emphasizes the effectiveness of abstinence to prevent sexually transmitted diseases.

This is offensive to my husband and me for the following reasons:

As Christian parents, my husband and I endeavor to teach our children that God has given them their sexuality and that His purpose for sex and His parameters regarding sexuality are to be followed. As Christians we realize that Marriage was the very first institution God ordained after His Creation. Sex was a part of that institution. The context of sex is marriage and the context of marriage is sex. They go hand in hand. God made it that way. The Bible has many other passages in which sex and marriage are discussed. Sexually activity is always to be limited to a marital relationship. Couples who wait for marriage to engage in sexual activity never regret their decision and do not fear the prospect of horrible diseases. When the schools teach kids about sexuality in any other context they are directly coming into conflict with the teaching of Christian parents. Not only is that offensive to us, it is also detrimental to society. You must take our concerns to heart. Our kids attend public schools and our kids live in the culture grown from

such schools.

This committee would better serve the children and families of our state if they would encourage enforcement of the current law that states HGD courses must include instruction in marriage. Our district in West Bend was ignoring that law; I wonder how many other districts are ignoring it, too. Don't children being raised in dysfunctional homes in the inner city and elsewhere deserve to have instruction in marriage taught to them and not just education about sex acts and how to use condoms? They are not animals after all, but people created in God's image, and they deserve to hear about good strong families, how to have a functional family (as defined by state law), and the benefits of having a strong family. And they deserve to know that waiting until marriage to have sex is a very attainable goal. I have worked with kids in summer camp programs, weekday programs and I have 4 of my own children. I know that kids need to learn marriage skills, yes even in school. This type of instruction will bring them hope. If you have endured pain from a broken home I'm certain you can appreciate what I am saying. Please do not repeal 2m from this bill.

AB 458 also shows hostility toward parents who desire to provide moral guidance to their children. The wording which states an HGD curriculum's purpose is to "support and enhance the efforts of parents to provide moral guidance to their children" was removed from the law. Removing that purpose is offensive to Wisconsin's parents as well. We would like your help and not your teaching that sex is nothing more than an act without regard to the morality taught in our homes and our churches.

I testify as a Christian, a nurse, a person who has had much experience working with kids, a wife, and a mother.

Thank you,

Mary Weigand
5629 Colleen Lane
West Bend, WI 53095



Eagle Forum of Wisconsin

Testimony in Opposition to Assembly Bill 458

Before the Assembly Committee on Education

October 5, 2009

I am addressing you today as both a mother and grandmother in our local school district. I am also a current member of the Human Growth and Development Committee in our school district, which is comprised of district administration, teachers, local pastors, parents and taxpayers, all who have a vested interest in our community. This year we worked as a collaborative team to identify the community standards of our city with regards to education in human growth and development for the youth within our district. Those who gave their time to this important working committee did so to maintain the strong values and community standards of our school district. Together we made collaborative decisions concerning curriculum presented to students at each grade level. Through research, sharing of information and open discussion we came to agreements on what we felt was most important to us as a community, and what fit best with State law. We tailored this program to fit the our school district, and I am proud of the efforts of those who are on this community. I can earnestly tell you this curriculum was not taken lightly as we know it affects the lives of our youth for years to come. The freedom we have as a local community to recognize the strengths and weaknesses within our district schoolchildren is invaluable, and we are vehemently opposed to usurping parental and local control by any organizational or governmental strong arm.

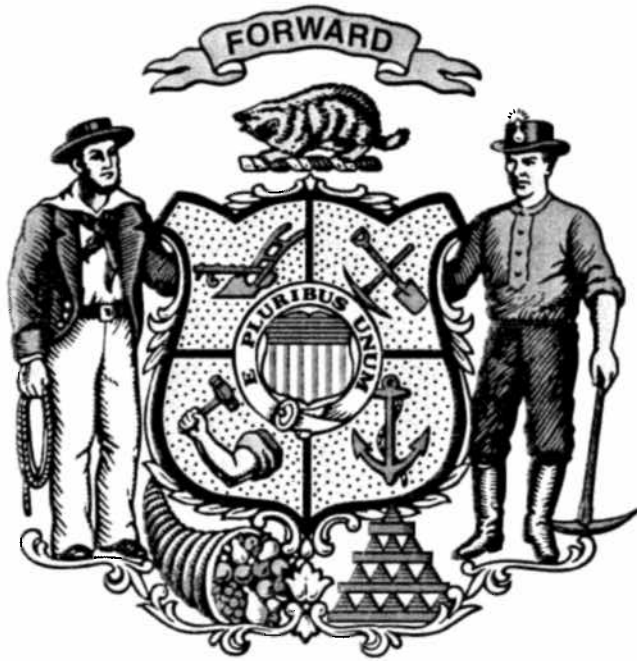
Now, I address you as the president of the Eagle Forum of Wisconsin, Washington County Chapter. As an advocate for parental rights, the protection of minors and strong family values in Washington County, I have spent countless hours among our taxpayers and citizens, confirming what we already know: that our community wishes to maintain local control of its school curriculum and guide our children in a manner we feel, and know, is best for our school district.

Wis. Statute 948.02(2) states that it is a Class C Felony for anyone to have sexual contact or engage in sexual intercourse with a person less than 16 years of age. The financial, legal and lifelong consequences of prosecution for this offense should be the focus of the legislature, while allowing parents and local school district committees to work towards the goal of protecting minors according to community standards.

With only 17-20% of all medical doctors in the entire United States maintaining membership in the American Medical Association, the Eagle Forum does not recognize the AMA to be a mainline medical organization; therefore, we do not consider information provided by the AMA to be credible as a resource for medically-accurate information.

Note section 115.28(9m) in AB458 that mandates the Department of Public Instruction to apply for federal birth control money. The Eagle Forum asks this question: Is this the prelude to establishing taxpayer-funded sex clinics in Wisconsin's schools?

The Eagle Forum of Wisconsin, to include our chapter in Washington County, strongly opposes Assembly Bill 458. Leave local control of Human Growth and Development intact, allow parents to continue parenting, and protect minors from lawful prosecution.





Wisconsin Coalition Against Sexual Assault, Inc.

600 Williamson St., Suite N2 • Madison, Wisconsin • 53703
Voice/TTY (608) 257-1516 • Fax (608) 257-2150 • www.wcasa.org

Testimony

To: Members of the Assembly Committee on Education
From: Wisconsin Coalition Against Sexual Assault (WCASA)
Date: October 6, 2009
Re: AB 458 – The Healthy Youth Act
Position: Support

Thank you for your time this morning. My name is John Keckhaver, and I am here representing the Wisconsin Coalition Against Sexual Assault (WCASA). WCASA is a statewide organization that was created in 1985 to support and complement the work of Wisconsin's community-based sexual assault service provider programs and other organizations working to end sexual violence. Our mission is to help create the social change necessary to end sexual violence.

We strongly support AB 458 and want to thank the authors of the bill for bringing this important proposal forward. This bill, which would ensure that the most current standards of sex education are being taught and that public schools are using programs that are proven to reduce teen pregnancy and sexually transmitted infection rates, comes at a crucial time. The teen birth rate in Wisconsin is rising – for the first time since 1994. The rate of sexually transmitted infections among Wisconsin teens is skyrocketing. A key strategy to turning these trends around is to give our students accurate, comprehensive information about pregnancy and disease prevention, along with opportunities for discussion of important relationship and growth issues. Engaging in risky sexual behavior and failing to understand and be comfortable discussing their own growth and sexual concerns can seriously jeopardize our young people's lives – both now and long into the future.

This bill does not present a mandate to school districts, but it does require that when sexual education is taught, that it be medically and scientifically accurate, age-appropriate, unbiased, and comprehensive. Nor does this bill take away a parent's right to opt their children out of a sex education curriculum in the event a school district chooses to include one. Also, the bill maintains that abstinence be taught as the most reliable way to prevent pregnancy and sexually transmitted infections.

Comprehensive sex education programs that teach about both abstinence and contraception have been shown to delay the onset of sexual activity among teens, reduce their number of sexual partners, and increase contraceptive use when they do become sexually active.

AB 458 will help ensure that our students in Wisconsin receive the information and opportunity for discussion they need to make better choices regarding their sexual activity. We urge you to enact the Healthy Youth Act, and to take the steps that many other states have already taken to ensure that our youth are receiving comprehensive and effective sex education.



Assembly Committee on Education Public Hearing
October 6, 2009

Testimony in support of AB 458

Good afternoon, my name is Jesse Miller-Gordon, I'm a student at UW Madison, and I'm here today in support of the Healthy Youth Act. Thank you, Chairwoman Pope-Roberts, for giving me an opportunity to speak on this important legislation.

I'm lucky to be the beneficiary of a well rounded, accurate sex education program, but over the last three years attending University, it has become apparent that many of my peers had received little to no information or guidance regarding sexual activity, even in their high school curriculum.

This worries me deeply because an uninformed, sexually active individual not only puts themselves at risk, but everyone they come into intimate contact with, and their partner's partners to come. A student in the college community practicing unsafe sex takes on the role of a drunk driver; they are a danger to themselves and those around them.

I recently received news from a close friend that he has contracted the HIV virus at the age of 20. One mistake one night will now dictate his actions for the rest of his life. He is also uninsured, but luckily receiving free health care, without which, he literally could not afford to live.

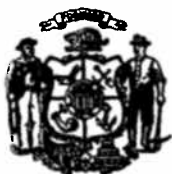
While this is great news for him, the individual cost of proper sexual education pales in comparison to the cost of his healthcare, which is quite expensive, as well as inconsistent and tied to the state of his affliction. If he were to fall ill, God forbid, the cost to the taxpayer would only rise. If he remains healthy, the current pricey regimen will continue indefinitely.

This is about more than money. Proper sexual education equips young people with the knowledge to act safely and responsibly if and when they choose to become sexually active. Cheating teens out of the information they need to make healthy, smart decisions is worse than careless; it sends a clear message to the youth that they are on their own at a time when their lives are becoming more confusing and complicated every day.

I urge you to vote to pass AB 458 without delay.

Jesse Miller-Gordon
143 N Butler St
Madison, WI 53703
jessemillergordon@gmail.com





Tamara D.
GRIGSBY

Wisconsin State Representative
18th Assembly District

*Member, Joint Committee on Finance
Chair, Committee on Children and Families*

**Testimony Before the
Assembly Committee on Education
October 6, 2009
Assembly Bill 458**

Good morning Chair Pope-Roberts and committee members. I am happy to be here this morning testifying on behalf of a bill that is so important to me that I've been working on during my entire tenure in the Wisconsin legislature- The Healthy Youth Act.

I would also like to thank Chairperson Pope-Roberts, and Representatives Dexter, Sinicki and Smith for cosponsoring this bill.

The Healthy Youth Act revises Wisconsin's sex education statutes by ensuring that if a school board chooses to offer sex education programs, it does so in a way that is medically accurate and age appropriate, focusing on core elements that are proven to reduce teen pregnancy and STDs.

- The evidence and research is very clear, the way to reduce teen pregnancy and STDs is through comprehensive sex education that contains the elements as proposed in this bill.
- The sad reality is that our youth in Wisconsin are experiencing a public health crisis, in my district and in most every district in the state.
- According to DHS and its most recent evaluation of young people, 45% of high schoolers self report being sexually active.

There is not only an increase of sexual activity among teens—but also an increase of risky sexual behavior like inconsistent use of birth control or use of drugs and alcohol prior to sex.

- Teen birth rates are on the increase in Wisconsin for the first time since 1994.
- The latest data from DHS shows teen birth rates on the rise in counties all across our state—including not just Milwaukee and Dane, but Wood, Vilas, Portage, Menominee, Manitowoc, Eau Claire, Brown and Adams, in addition to many other counties. About 11,000 teens will become pregnant this year, and over 80% will be unintended.
- Teen mothers and their children face very bad health outcomes. Teen moms are more likely to have low birth weight babies, and the younger the teen the greater the risk. Teen moms also have much higher rates of infant mortality—again, the younger the teen the greater the risk.

It's not just teen pregnancy that is increasing among students in Wisconsin, but also the incidence of sexually transmitted diseases. According to the U.S. Center for Disease Control, 1 in 4 teen aged girls has a sexually transmitted disease like Chlamydia.

This increase in risky behavior among teens and the negative health outcomes associated with it have an enormous impact on Wisconsin's health, economic security and future.

- Children born to teen mothers are 9 times more likely to live in poverty. For our more urban areas, like my district in Milwaukee, we see this demonstrated by the fact that our teen birth rate is among the highest in the nation and that 1 in 3 children live in poverty. This is unacceptable and I believe it is our moral imperative as law makers to address these horrible levels of poverty in our biggest city.

We must do more to combat these public health problems in our state. Luckily, research shows us where we can start—that's where the Healthy Youth Act comes in. Our young people need comprehensive, medically accurate and age appropriate sex education that is provided throughout their school years—by parents and educators alike.

- Countless studies over the last 10 years, studies that have been published by experts in peer-reviewed journals, have found that comprehensive sex education—programs that teach teens about both abstinence and contraception/disease prevention—is an effective strategy to help young people delay their initiation of sexual intercourse.
- Research has found that comprehensive sex education programs can:
 1. delay the age of first sexual activity
 2. reduce the frequency of sexual activity
 3. reduce the number of sexual partners, and
 4. increase condom or contraceptive use.

I think the answer is pretty clear. The research has shown us what works in preventing these terrible health outcomes, and the Healthy Youth Act supports what we've learned.

The Healthy Youth Act encourages schools to provide human growth and development, or sex education, programs. It does not mandate that schools provide sex ed, although I truly hope that most schools will choose to do so.

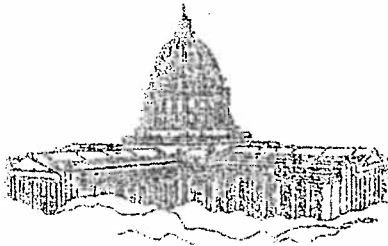
If schools do provide sex education, the Healthy Youth Act requires the programs be age appropriate, medically accurate and incorporate the elements set forth in the bill. The programs can and should talk about abstinence and the important role it plays in keeping teens healthy—but it cannot stop there.

- Under current law, abstinence is the only element listed to prevent pregnancy and STDs and that's just not enough. As I mentioned, the majority of the current research shows that to be effective in reducing teen pregnancy and STD rates, sex ed programs should also include core elements that give teens more tools than just abstinence.

Our teens in Wisconsin are important and we should take their education and health seriously. It's time to give our schools, communities, educators and parents the support that they need to provide students with the tools and information they need to make healthy decisions—now and throughout their lives.

I urge this committee to please pass this important bill. Wisconsin youth deserve nothing less.





LENA C. TAYLOR

Wisconsin State Senator • 4th District

HERE TO SERVE YOU!

**Testimony of Senator Lena C. Taylor
Assembly Committee on Education
AB 458 - Healthy Youth Act
October 6, 2009**

Honorable Chairwoman Pope-Roberts & members,

I am incredibly happy to be here today and offer testimony in support of AB 458 - The Healthy Youth Act alongside of my colleague and Assembly author, Representative Tamara Grigsby (D-Milwaukee). Together, Rep. Grigsby's & my testimony, will lay out the need for the Healthy Youth Act and exactly what this bill does.

To begin with, my hometown of Milwaukee, which is where I was born, raised, went to school & university, worked, and now represent is in serious crisis. Teen Pregnancy in Milwaukee is far too high, in fact near the top city in the nation for the number of births to teens.

According to the CDC, The US teen birth rate is 42.5 births to every 1000 teens. The same report shows Milwaukee with 64 births to every 1000 teens. Milwaukee far exceeds out national average and this is also a large contributing factor to major problems in Milwaukee.

Among the nation's 50 largest cities, Milwaukee statistics are shocking:

- o 7th for infant mortality
- o 15th for low-birth weight babies
- o 7th for number of mothers under age 20
- o 1 out of 3 children living in poverty
- o According to DHS, in 2007 there were 2085 births to teens in Milwaukee county—approximately 13% of all births.
- o Of the 50 biggest cities, Milwaukee has the 2nd highest Chlamydia rate.

Milwaukee is not alone. Wisconsin faces a crisis in teen pregnancy. Approximately 750,000 teens become pregnant each year and over 80% are unintended. 11,000 teens in WI will become pregnant this year. New data shows that a many Wisconsin counties have teen birth rates higher than the U.S. average:

- | | | | |
|-------------|------------|------------|-----------|
| • Menominee | 139 / 1000 | • Racine | 49 / 1000 |
| • Sawyer | 58 / 1000 | • Rock | 46 / 1000 |
| • Adams | 54 / 1000 | • Langlade | 45 / 1000 |

The cities of Green Bay, Racine and Kenosha have teen birth rates almost double the national average.

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Committee on Judiciary, Corrections, Insurance,
Campaign Finance Reform, and Housing (Chair)
Committee on Justice Reinvestment
Initiative Oversight (Chair)

Joint Committee on Finance
Joint Committee for Review of Criminal Penalties (Co-Chair)
Committee on Strengthening Wisconsin Families (Co-Chair)
PRINTED ON RECYCLED PAPER

The numbers alone bear witness to the fact that something is dreadfully broken in our system in Wisconsin. We are not preparing or teaching our children good sexual education that answers questions and is proving to prevent the problems we have laid out.

For years we've had a weak sex education policy that doesn't address the needs of students or educators in Wisconsin. The Healthy Youth Act ensures that the most current standards of sex education are being taught and that public schools are using programs proven to reduce teen pregnancy and STI rates. The bill updates the core elements of what a sex education program must include if offered in Wisconsin and does away with ineffective abstinence only policies.

The 5 key components of the bill are:

- Requires that school boards that decide to teach sex education do so in a medically accurate, age appropriate way that addresses key elements proven to work at reducing sexually transmitted infections and unintended teen pregnancies, including providing information about abstinence and contraceptives. The various elements specified in the bill only need to be taught when age-appropriate;
- Requires that school districts that opt to not teach sex education send a notice home to parents;
- Requires that the state apply for federal funds that are allocated for evidence-based teen pregnancy prevention programs;
- Deletes a provision in current statutes that forbids volunteer health care providers from providing sex education instruction in areas concerning human sexuality and contraception; a
- Supports the current ability of parents to opt children out of sex education curriculum.

Wisconsin has a long history of ensuring that schools and parents have the option of allowing their students and children to receive instruction in sexual education or not. We will not undo that long tradition. The Healthy Youth Act does not mandate that all schools teach sex education, as under current law a school board maintains discretion whether sex education instruction is provided to students; and it maintains the ability of parents to pull their children out of sex education classes if they so choose.

The Healthy Youth Act takes proven strategies for success and implements them where school districts choose to do so. I encourage your support of this needed and appropriate legislation.





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Testimony in Opposition to Assembly Bill 458
Assembly Committee on Education
By Julaine K. Appling, President
October 6, 2009

Thank you, Chairman Pope-Roberts and other committee members, for this opportunity to provide testimony on Assembly Bill 458.

My name is Julaine Appling. I am president of Wisconsin Family Action, a statewide pro-family organization that educates, informs and advocates on behalf of Wisconsin citizens regarding legislative and cultural issues that impact our families. Wisconsin Family Action represents tens of thousands of families all across this state that very much care about bills such as the one under discussion today.

Many of these families would be here today. The extremely short notice regarding this hearing makes that virtually impossible, as it is obviously difficult for families to rearrange work schedules at the last minute and plan a trip to Madison on a work day, a trip that may require hours of travel time. It is unfortunate that the authors and committee leadership have chosen to functionally deny many citizens input on this important issue.

Wisconsin Family Action is opposed to Assembly Bill 458 and urges all committee members to take the same position. We are opposed to this bill for many reasons, but I will contain my comments today to just five (5) key points. As a general comment, we do believe the name given to this bill by its lead sponsors is not in any way accurate. It will not promote healthy youth; quite the contrary. It will promote unhealthy youth.

1. Assembly Bill 458 removes the possibility that any school district in Wisconsin that chooses to have a Human Growth and Development program can elect to have one that is abstinence-centered. It condemns all school districts to the so-called "comprehensive sex education" approach that has been responsible for the crisis that we currently have in unprecedented rates of sexually transmitted diseases among our teens and increasing teen pregnancies. In fact, this is the very crisis that the authors and co-sponsors of this bill now claim this provision will address.

How more of the same, much more of the same, will solve the crisis created by this approach to sexual education is beyond me. It is not lost on us that these mandates essentially make the required Human Growth and Development committees a joke. Why even bother with the sham of a committee, when a committee is powerless to create a HG&D program that is truly of its choice—one that is abstinence-centered, for instance, or even the so-called abstinence-based programs currently in many school districts. An abstinence-centered program is not the "just say no" approach; it's an effective, evidence-based, scientifically accurate, age-appropriate, risk-avoidance program.

Abstinence-centered curricula do not ignore the temptations, expectations, risks and facts of teen sexuality—they incorporate those facts into comprehensive programs centered on abstinence education. Abstinence-centered programs give kids a road map for their future, help them set goals and identify and learn the skills they need to get there without sacrificing their happiness and health. It's a holistic approach to this important subject, one that considers the intellectual, physical, emotional, social and overall well-being of teens. Such programs truly promote "healthy youth."

2. Assembly Bill 458 is an affront to parents and their desire to stay informed about what their children are learning in school. Changing the way and times when a school district's HG&D curriculum and instructional materials are available to parents does not help parents be engaged with the education of their children. This bill requires that if parents want to "inspect" the curriculum and the instructional materials, they must do so prior to implementation. At least as important is that taking out the word *all* in reference to what instructional materials parents may inspect, leads one to conclude that school officials may purposely omit certain materials they do not parents to see. Nothing, absolutely nothing that happens in a school classroom should be kept from parents who want to know.
3. Assembly Bill 458 removes the current requirement that marriage and parental responsibility must be taught in the same course and same year as particular HG&D subjects. This requirement links sexual behavior appropriately to marriage. If the sponsors of this measure are in earnest about reversing trends in youth regarding sexually transmitted diseases and pregnancies, then they will reinstate these requirements because linking sexual activity to marriage is one of the best ways to reduce unintended teen pregnancies and sexually transmitted infections. Even from just a purely economic standpoint, this bill is bad public policy. According to a first-ever report published last year by the Institute for American Values births to unwed mothers and fractured families cost Wisconsin taxpayers, at a minimum, \$737 million every year.
4. Assembly Bill 458 removes the current requirement that abstinence from sexual activity must be presented as the preferred behavior choice for all unmarried students. Once again, we are removing sexual activity from the bonds of marriage. While under this proposal students will be told, in the language of the bill, "the benefits" of abstinence, they will not hear it in its proper context—abstinence until marriage. The message will be lost in the cacophony of comprehensive sex ed voices extolling the alleged "health benefits" and explaining the proper use of condoms and other contraceptive drugs and devices. I would submit to this committee that there is no health benefit in premarital sexual activity.
5. Removing the stipulation that a volunteer health-care provider that comes into a school must not address such issues as family-planning, reproduction, HIV and AIDS, among some other select topics, means that so-called family-planning organizations are being given free and open access to present basically whatever they want to in our public school classrooms to a captive audience. It is hardly any wonder that the state's major family planning organizations are heartily behind this bill; it is a dream-come-true for them.

There is much more in AB 458 that we object to. However these five points highlight some of the egregious problems and illustrate why we refuse to use the misleading title given this bill. We believe this measure would result in decidedly unhealthy youth and will actually encourage teen sexual activity. Increased teen sexual activity will ultimately result in more teen pregnancies and high rates of sexually transmitted diseases and infections. How do we know that? Because we have a track record that shows that this is the result of "comprehensive sex ed" programs, such as the one being proposed in AB 458. Surely our youth deserve better than a program that is far more about the "health" of family-planning organizations than it is about the health of our young people.

Wisconsin Family Action urges you to vote no on Assembly Bill 458.

Thank you for your time today.



Testimony in Support of State Assembly Bill 458 Relating to Instruction in Human Growth and Development

Assembly Committee on Education

October 6, 2009

Members of the committee, thank you for giving me this opportunity to speak with you today. My name is Jennifer Lewis and I am a graduate Social Work student at the University of WI Milwaukee. I am here today to speak in support of Assembly Bill 458 and responsible sex education.

I spent my undergraduate Social Work career working with children and teenagers within the county juvenile justice and child welfare systems. I worked in community based residential facilities in direct care and case manager roles. Throughout the four years that I worked in this area of Social Work, I repeatedly witnessed the aftermath of teens engaging in unprotected sex and teen pregnancy, and not only the effects on the individual adolescent's emotional and physical health, but how the families, communities, and futures of these youth are affected. I feel very strongly that with comprehensive, medically accurate and age appropriate sex education available in the public schools, teens would have the resources they need to make educated and safe decisions regarding their sexual health, allowing them to avoid the path I have seen so many teenagers take.

Teen pregnancy and teen parenting forever impacts the life of the young parents, the whole family system and, of course the child of a teenage parent. I recall one young 15 year old girl in the facility I worked at who, herself the child of a teen parent, became pregnant. This young woman had just recently completed a pregnancy prevention program that supplied plenty of information about remaining abstinent and required the participants to care for computerized doll babies for two days after wearing around a pregnancy simulator belly for a couple of hours. This program provided no education about safe sexual practices, human development, contraception, or healthy relationships. Not only did this 15 year old girl find herself pregnant but she had contracted a sexually transmitted disease as well. I understood this young woman would likely face a life ahead of her that she was not prepared for.

Teen parents face extraordinary life challenges and negative outcomes including: Dropping out or struggling to finish school, living in or near poverty, living on public assistance, a higher likelihood of entering the child welfare system and increase risk of their children also becoming teen parents.

Her story is just one example of a life of struggles, which is completely preventable with responsible education and resources for young people. Young people are sexually active, and will continue to be sexually active, and it is important to me as a Social Worker that they have access to the best possible education and resources to prevent situations like the one I just described.

The Guttmacher Institute states that responsible sex education, HIV/AIDS education, and pregnancy prevention education does not encourage teen sexual behavior; increase the number of partners or frequency. It in fact, delays the onset of sex and decreases the number of sexual partners, and increases safe sex practices with teens that choose to have sex (The Guttmacher Institute Facts on Sex Education in the United States, 2005). Perhaps if the young mother I told you about had access to responsible sex education, she could have made better choices regarding her sexual activity and health.

Teen pregnancy and teen parenting cost the state of Wisconsin tax payers millions of dollars every year to pay for public assistance and child welfare services for teen parents (The National Campaign to Prevent Teen & Unplanned Pregnancy). Teen parents often are single parents, with little to no education on how to support themselves, let alone their child. Teen parents get stuck in the cycles of poverty, abuse, and neglect, and the cycle frequently repeats itself throughout future relationships and generations. This is all completely preventable with sex education that provides information about both abstinence and contraception, disease prevention, human growth and development, healthy relationships, and sexual health.

I ask you to please support this bill, thank you.

Jennifer Lewis
2333 N Oakland Ave #104
Milwaukee, WI 53211



Testimony



307 South Paterson Street, Suite 1
Madison, Wisconsin 53703
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To: Members of the Assembly Committee on Education
From: Tony Gibart, Policy Coordinator, Wisconsin Coalition Against Domestic Violence
Date: October 6, 2009
Re: Assembly Bill 458 – The Healthy Youth Act

Thank you for the opportunity to provide testimony on Assembly Bill 458, the Healthy Youth Act, which will increase the number of young people in Wisconsin receiving the help, tools, and information they need to live free from violence. The Act will ensure that schools that choose to teach sex education will provide students with comprehensive information about healthy relationships. My name is Tony Gibart, and I represent the Wisconsin Coalition Against Domestic Violence (WCADV). WCADV is a statewide, non-profit, membership organization of battered women, formerly battered women, domestic abuse programs, and individuals committed to ending domestic violence. WCADV supports the Healthy Youth Act.

Historically, WCADV and local domestic violence programs have focused on keeping victims of violence safe after they have been abused. In the field of public health, this is known as tertiary prevention. More recently, domestic violence victim advocates have made greater efforts to engage in primary and secondary prevention of abuse. At these levels, prevention involves changing the individual and societal values that permit violence to exist and educating at-risk individuals on how to prevent victimization. The Healthy Youth Act will build on the efforts of advocates by bringing primary and secondary prevention of dating violence into more classrooms across Wisconsin.

Under the Healthy Youth Act, school curricula would promote self-esteem and positive interpersonal skills focusing on healthy relationships, including friendship, dating, marriage, romantic involvement, and family interactions.

Women ages 16-24 years old experience the highest per capita rate of intimate violence in the U.S., and 40% of teenage girls report knowing someone their age who has been hit or beaten by a boyfriend. Teen dating violence is often hidden because teen victims are typically inexperienced with dating relationships, want independence from parents and adults, and are less able to recognize abusive behavior. Teens are still developing emotionally and intellectually, and school and peer relationships can complicate a teen's ability to cope with a violent dating relationship. Students need to have education and support so they can speak out against abuse and have the power to eliminate it.

Curricula would identify resources for counseling, medical and legal resources for survivors of abuse, including resources for escaping violent relationships.

Too many young people are trapped in unhealthy relationships and feel they have no one to turn to for help. One in three teens will experience abuse in dating relationships and two-thirds of them will never report it to anyone. Victims often do not feel safe in school because it is likely that the abuser is also a student, prohibiting the victim from seeking help from classmates and teachers. The Healthy Youth Act will make it more likely that teen victims will be aware of and use outside resources, which are often key to ending the violence.

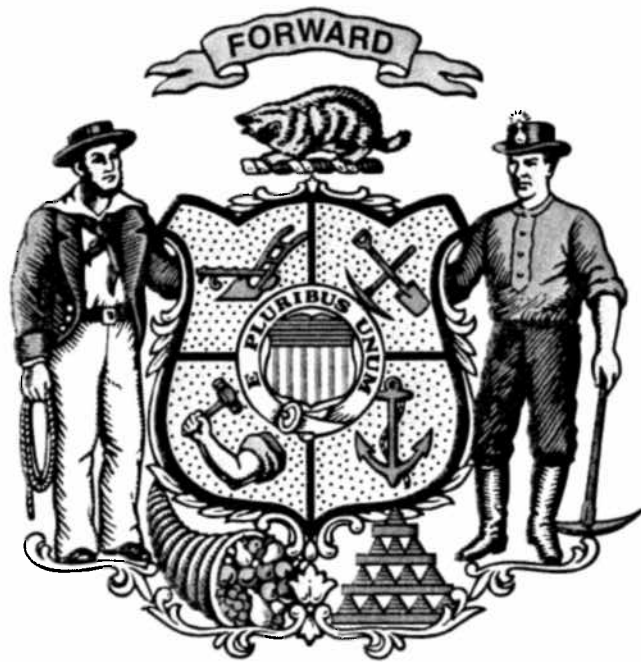
Curricula will teach students how to refrain from making inappropriate verbal, physical and sexual advances and how to recognize, rebuff and report any unwanted or inappropriate verbal, physical and sexual behaviors.

In dating violence, one partner tries to maintain power and control over the other through abuse. Teens need to be educated on how to recognize the early warning signs of an abusive relationship. Because of peer-pressure and unhealthy cultural norms, some teens may believe they have the right to control and abuse their partners. Likewise, victims may feel that the abusive behavior they are experiencing is a natural part of intimate relationships. With the Healthy Youth Act, the legislature can take a significant step in counteracting the destructive norms and values that fuel teen dating violence. Under the bill, students will be educated on what constitutes appropriate behavior and empowered to discourage and stop abuse.

The curricula would provide information about pregnancy, body images, and gender stereotypes.

For teen girls, being a victim of dating violence is associated with increased risk of substance abuse, unhealthy weight control behavior, risky sexual behavior, pregnancy, and suicide. Girls in high school who reported experiencing dating violence were four to six times more likely to have ever been pregnant than peers who had not experienced dating violence. The Healthy Youth Act and model sex-ed curricula appropriately address the fact that teen pregnancy, dating violence, and unhealthy views of gender roles and body image often are interrelated. By addressing sex education in a comprehensive way, the Healthy Youth Act will make significant strides in preventing dating violence.

Thank you for the opportunity to provide testimony on the Healthy Youth Act. The Act will be a significant step towards preventing teen dating violence and empowering youth to build lives and communities free from domestic abuse. I urge you to support this legislation.



Pro-Life Wisconsin



Defending them all...

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Testimony in Opposition to Assembly Bill 458: Providing Instruction in Human Growth and Development Assembly Education Committee By Matt Sande, Director of Legislation

October 6, 2009

Good morning Chairwoman Pope-Roberts. My name is Matt Sande and I serve as director of legislation for Pro-Life Wisconsin. Thank you for this opportunity to express our opposition to Assembly Bill (AB) 458, legislation restructuring Wisconsin's K-12 instruction in human growth and development.

Assembly Bill 458 would effectively prohibit local school districts from adopting "abstinence-only" human growth and development programs – a freedom and flexibility they now enjoy under current law. The language of the bill itself requires the instruction to "stress the value of abstinence as the most reliable way to prevent pregnancy and sexually transmitted infections." **If the authors therefore agree that abstinence is the most effective method of protecting our youth from underage pregnancies and the ravages of sexually transmitted diseases (STDs), then why not allow a school district to make abstinence its sole focus?** This heavy-handed bill ties the hands of local human growth and development advisory committees – a violation of the principle of local control.

Proponents of AB 458 emphasize the reduction of "risky sexual behaviors" among our youth as the primary aim of the legislation. If that is the goal, forcing contraception education into the curriculum is not the answer. In fact, it is ineffective and dangerous. **Government-funded birth control, whether provided directly or promoted educationally, encourages sexual promiscuity and with it a host of social pathologies including underage pregnancies, chemical and surgical abortions, and STDs.**

Hormonal contraceptives including the Pill, the Morning-After Pill, and the Patch provide no protection from any of the 25 known sexually transmitted diseases, including HIV, human papillomavirus, chlamydia, herpes, gonorrhea, genital warts, syphilis and hepatitis B. Human papillomavirus (HPV) infection is currently the most prevalent sexually-transmitted disease. "High risk" subtypes of sexually-transmitted HPV (such as HPV-16 and HPV-18) cause 70 percent of cervical cancer in women, genital and anal cancers in men. The only way you can prevent getting an HPV infection is to avoid direct contact with the virus. **Research studies have not confirmed that male latex condoms prevent transmission of HPV, so even a curriculum's emphasis on barrier methods is irresponsible.**

With over thirty viruses today compared to only two in 1960, STDs among our teens have become a full-blown epidemic. Every day, 8,000 teens become infected with an STD – a direct result of our overemphasis on birth control and our culture's "sex-with-no-consequences" mindset. After twenty years crusading for safe sex by dispensing condoms and the Pill to adolescent patients, Dr. Meg Meeker, M.D., as described in her book Epidemic – How Teen Sex is Killing Our Kids, realized she was horribly mistaken when her teen patients began marching in with dangerous STDs. She now counsels teens and parents on the *medical* importance of abstinence.

Assembly Bill 458, the so-called *Healthy Youth Act*, forces contraception education into our school-based curriculums. Yet hormonal contraceptives have been proven dangerous to women's health. Users of the pill and the morning-after pill have an increased risk of blood clotting and ectopic pregnancy, both of which can be fatal. The Ortho Evra patch is being blamed for a number of deaths due to blood clots, heart attacks and strokes. The Associated Press analyzed 16,000 reports of adverse events filed with the Food and Drug Administration, finding the risk of death from a blood clot is three times higher for women using the patch. How do these powerful, steroidal drug regimens improve our children's health?

Assembly Bill 458 stresses the importance of "medically accurate information." **Will such information include the medical fact that most if not all hormonal birth control drugs and devices cause early chemical abortions?** The morning-after pill (a high dosage of the birth control pill), the intrauterine device (IUD), Depo Provera, the Patch, and the Pill can act to *terminate* a pregnancy by chemically altering the lining of the uterus (endometrium) so that a newly conceived child is unable to implant in the womb, thus starving and dying. This mechanism of action is termed a pre-implantation chemical abortion.

One need only explore the websites of individual abortifacient brand-name drugs to verify their abortion causing effect. The most commonly used emergency contraceptive pill package is Plan B. The website for this drug regimen clearly indicates that it can work to prevent a fertilized egg (a human embryo) from implanting in the uterine wall:

Source: www.planbonestep.com. Click on *Pharmacists*, then click on *How Plan B® One-Step Works*: Plan B® One-Step works primarily by preventing ovulation, possibly preventing fertilization by altering tubal transport of sperm and/or egg, and **altering the endometrium, which may inhibit implantation**. Plan B® One-Step is not effective once the process of implantation has begun. It will not affect an existing pregnancy or harm a developing fetus. (emphasis added)

The package insert of Lo/OVRAL-28, a standard birth control pill manufactured by Wyeth Laboratories, also describes the mechanism of the drug:

Lo/OVRAL-28: Combination oral contraceptives act by suppression of gonadotropins. Although the primary mechanism of this action is inhibition of ovulation, other alterations include **changes in the cervical mucus (which increase the difficulty of sperm entry into the uterus) and the endometrium (which reduce the likelihood of implantation)**. (emphasis added).

While admitting that hormonal birth control can inhibit the implantation of a fertilized egg, the makers of these drugs claim that they do not cause an abortion. For example, they argue that emergency contraception "prevents pregnancy" or "will not affect an existing pregnancy."

However, they intentionally define the term "pregnancy" as *implantation* of a fertilized egg in the lining of a woman's uterus, as opposed to "pregnancy" beginning at *fertilization*:

Whether one understands pregnancy as beginning at "implantation" or "fertilization," the heart of the matter is when human life begins. Embryological science has clearly determined that human life begins at fertilization – the fusion of an egg and sperm immediately resulting in a new, genetically distinct human being. Accordingly, any artificial action that works to destroy a fertilized egg (human embryo) is abortifacient in nature.

Young women have a right to know the abortion-causing effects of hormonal contraceptives so that they may make informed decisions that respect the lives of human beings, even in their earliest stages.

Concerning the *Volunteer Health Care Provider Program*, Pro-Life Wisconsin strongly opposes removing the current law provision that prohibits a school-based health volunteer from providing human growth and development instruction in the areas of human sexuality, reproduction and family planning. Sexual and reproductive "health" issues are not properly under the purview of a school health room physician or nurse. Five years ago, our organization made a good faith compromise with Representative Richards guaranteeing this limitation on human growth and development instruction by a volunteer provider. Section 10 of AB 458 strikes this common sense restriction from current law therefore abrogating this compromise.

The *Volunteer Health Care Provider Program* confers legal protection to a health care volunteer by treating the volunteer as an agent of the state under the Department of Health Services. Therefore, if a civil lawsuit were to be brought against the health care volunteer as the result of services provided through the program, the state of Wisconsin would assume legal liability.

AB 458 as currently drafted would permit contraceptive or abortion education by a Planned Parenthood volunteer health provider. This could involve a referral to the nearest Planned Parenthood clinic where a child could be given contraceptive drugs and devices or directly referred to one of Planned Parenthood's abortion clinics. Wisconsin taxpayers should not be assuming legal costs for a civil action brought by the parents of a student who has been referred by a health volunteer to a local Planned Parenthood clinic and there given birth control drugs such as the "morning-after-pill" or referred for an abortion.

Pro-Life Wisconsin opposes the sexualization of our children. With his reports on the *Sexuality and the Human Male* (1948) and *Sexuality and the Human Female* (1953), zoologist Alfred Kinsey ushered in the sexual revolution. He argued that children are sexual from birth and that deviant sexual activity is natural and normal and ought not to be stifled or repressed.

According to *Concerned Women for America*,* "Fifty years of his deception have moved our culture into a world of sexual and moral relativity. With this, we now have epidemic levels of rape, sexually transmitted diseases, illegitimacy, child molestation, promiscuity, pornography, and broken lives. America has bought into the Kinsey lie far too long. As parents, educators, and concerned citizens, we need to stand up to this assault on our children."¹

¹(Contraception or Deception? by Elizabeth Bossom, 8/22/02, updated 3/8/06, Concerned Women for America)

The sexualization of our children is not without harmful consequence. Sigmund Freud contended that the period of life from 6 to 12 years was, normally, a "sexual latency" period where a child suppresses sexual interest and develops other important behavioral capabilities. Freud, in fact, stated that an undue dwelling on sexual matters during this time of life would hinder a person's normal development.

Why is it, then, that some adults see fit to thwart the normal development of a child – to in fact sexualize a child – who has no natural interest in such a topic? Is this not contrary to our goal of educating well rounded, happy, complex free kids who can integrate the virtue of chastity into their lives – along with the virtues of self-discipline and responsibility?

I'd like to close with a thought on this topic from Mahatma Gandhi. Gandhi, India's "Great Soul," often spoke on sexual morality, and frequently emphasized the importance of sex education. He defined the fundamental difference between comprehensive sex education and chastity education as follows:

Sexual science is of two kinds, that which is used for controlling or overcoming the sexual passion, and that which is used to stimulate and feed it. Instruction in the former is as necessary a part of a child's education, as the latter is harmful and dangerous, and fit, therefore, only to be shunned.

The sex education that I stand for must have for its object the conquest and sublimation of the sex passion. Such education should automatically serve to bring home to children the essential distinction between man and brute, to make them realize that it is man's special privilege and pride to be gifted with the faculties of head and heart both, that he is a thinking no less than feeling animal, and to renounce the sovereignty of reason over the blind instincts is, therefore, to renounce a man's estate.²

Mohatma Gandhi: a legacy of peace, non-violence, religious and ethnic tolerance, greater rights for women, and the search for truth.

Alfred Kinsey: a legacy of sexual license, promiscuity, epidemic levels of rape, sexually transmitted diseases, illegitimacy, child molestation, pornography, and broken lives.

What legacy shall we leave *our* children?

Thank you for your consideration, and I would be happy to answer any questions committee members may have for me.

²(Fr. A.S. Antonisamy. *Wisdom for All Times: Mahatma Gandhi and Pope Paul VI on Birth Regulation*. Family Life Service Centre, Archbishop's House, Pondicherry 605001 India, June 1978.)

CASE STUDIES

Compelling data indicates that broad contraceptive availability may actually work to *increase* underage pregnancy and abortion by encouraging sexual promiscuity, debunking Planned Parenthood's theory that the provision of contraceptives to teens will reduce underage pregnancies.

A March 2002 study published in the *Journal of Health Economics* investigated the impact of family planning on teenage conceptions and abortions by testing data from 16 United Kingdom regions over a 14-year period.* **The author of the study concluded that "the overall effect of expanding family planning services for under-16s has been to increase pregnancies and abortion."**

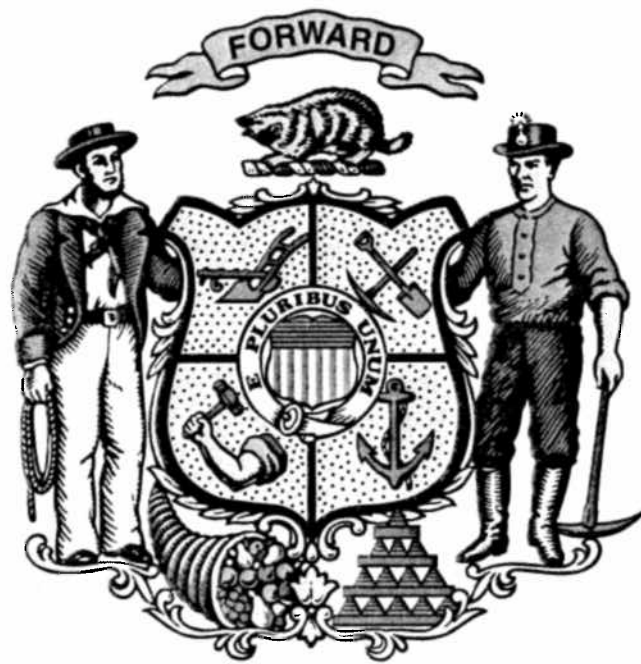
*("The Economics of Family Planning and Underage Conceptions," Dr. David Paton, Nottingham University Business School)

The morning-after pill is available without a prescription in Great Britain. In an attempt to reduce the teen birthrate, Britain used taxpayer funds to enable women under age twenty to pick up free doses of the morning-after pill at local pharmacies. As this was going on, *The London Times* reported an epidemic of STDs among British teenagers with skyrocketing diagnoses of the diseases among teens over a five-year period.* The experiment was a total failure. Promotion, public funding and liberal distribution of the morning-after pill among Great Britain's teen population had the opposite effect of increasing sexual promiscuity and STD rates.

*("The Price of Casual Sex," Carol Midgley, *The London Times*, January 29, 2002)

An April 2003 study published in the journal *Adolescent and Family Health* found that increased abstinence, not contraception, was the major cause of declining birth and pregnancy rates among single teenage girls.* It overturns Planned Parenthood's claim that 75 percent of the decline in the pregnancy rate is due to contraceptive use and 25 percent to abstinence. The authors compared the drop in the birth and pregnancy rates between 1991 and 1995. **Among unmarried teens aged 15 to 19, abstinence accounted for 67 percent of the decrease in the pregnancy rate.** Similarly, a 51 percent drop in the birth rate for single teens aged 15 to 19 was attributed to abstinence.

*("An Analysis of the Causes of the Decline in Non-marital Birth and Pregnancy Rates for Teens from 1991 to 1995," Joanna K. Mohn, MD, Lynne R. Tingle, Ph.D., Reginald Finger, MD, MPH)



Date?

AB458

For starters we implemented an Abstinence only component to our 10th grade health class as a choice for parents and their children which teaches the emotional, psychological, social and physical benefits of abstinence until marriage versus the normal 10th grade component which taught comprehensive sex education. We started the ball rolling by collecting the signatures of 1800 residents of West Allis. AB458 Will fly in the face of all that work, and deny freedoms upon which this country was founded.

1. There are many school districts which have never had allowances for a choice but at least there was local control so that it could change. Now the state has every intention denying academic freedom of a choice and a denial of freedom of local control. This will now be the only subject should AB458 become law, where the school districts provides no choice for the kids or parents. In many areas such as; math, social sciences, sciences and English, there are a number of choices for parents and their children at the middle school and high school level, as far as which classes they will take. For social science, examples include; history, geography, sociology and psychology.
2. Human Growth and Development is the only curriculum where the schools touches the heart of family, parents and their children in their personal and religious beliefs. This strikes at the heart of parent and family rights. Parents and their children deserve to have a possibility of choices in this course. And any truly free society deserves to have local control
3. In order to support a cultural diverse society and in order to support and show concern for families and their children, it is not only fair, but also beneficial allow school districts to choose to have local control. There is no logical reason to deny local control the ability of to have choices for schools, children and their families. It would stand against freedom of choice and freedom of religion should AB458 be allowed to move forward..
4. All of Christianity, Judaism, Mormonism, and Islam teach on the basis of their scripture that sex outside of marriage is wrong. Only the religion of Humanism based on Human Manifesto I and II (note manifesto I was signed by John Dewey founder of progressive education) approve and support sex outside of marriage. So in essence, one religious worldview is now to be supported over the majority of other religions across board should you allow AB458 a violation of your separation of church and state.
5. Up until the 1930's all Christian denominations taught that the use of artificial contraception was sinful. The teaching of artificial contraception has been and in some cases, continues to be a direct attack on strongly held religious beliefs. Offering a choice in these circumstances would prevent the alienation of a substantial number of students' families.
6. To deny choice to deny local control would seem to indicate that the intent of government at all levels is to indoctrinate and to dictate to schools, parents and families. It is ultimately tyrannical in nature. Government education under these circumstances will continue to see families abandon so-called public education, with a continuing decline in students and money. Government under these circumstances would seem to be looking for rebellion of common ordinary citizens
7. It seems there is a blue print that has been put in place which has steadily grown over the last 40 years and is being followed to a tee in AB458. It was made a matter of the 1963 congressional record. It encourages promiscuity, promotes obscenity under the banner of free speech, and promotes the breakdown of the family through easy divorce. See congressional record of communist goals from 1963 as an attachment goals 24,25,26 and 40. I ask will they have they reached there goals with the passage of AB 458

The Boundaries of Sexual Relations -Marriage

The passion, warmth, beauty, and fire of sexual relations are like that of a burning fire in a fireplace. Once outside of their natural boundaries, both sexual relations and fire will destroy the individual, people around them, and everything you have and own. This is the devastating effect of sexual passions outside of the natural bonds of marriage.

All sexual relations outside of marriage work toward weakening and eliminating marriage as an institution. Anything that weakens and causes the destruction of marital bonds ultimately works towards the destruction of the well being and character of **children** and ultimately of our society at large.

Why is this so?

Sexual passions before marriage creates self-centered gratification, using people to meet ones own selfish sensual desires. Women and men can become sexual commodities to be bought, sold, and traded, all to meet this self-gratification. One streetcar becomes as good as another, miss one, there will be another in fifteen minutes.

If we do not learn to control our passions before marriage, there will be no reason to expect that our passions will be controlled after marriage. Hence, **pornography** to entice one's sensual pleasures and marital affairs run rampant in today's society, all working to tear marriages apart.

If we are participating in self-gratification of sexual relations prior to marriage, we are engaged in using people to meet our wants, and selfishness--the exact opposite of what marriage is all about. You see, marriage is meant to be self-giving through self-sacrifice. We end up marrying the wrong person because we were blinded by sexual activity, never truly learning what our partner was like before marriage. We marry wrongly because we marry with an attitude of what's in it for me and when the relationships grows tired or weary, we bail out for another streetcar.

Consequently all sorts of diseases are spread, many of which are incurable, meaning we carry them for life and hand them on to our partners and worse cause physical harm to our offspring-- our babies, our children. Finally, some sexually transmitted diseases causing sterilization and some ultimately cause death.

Scripture is clear on this. Without true repentance, this self-centered gratification leads to the death of the soul for all eternity.

1 Cor 6:9; **neither the sexual immoral- fornicators nor idolaters, nor adulterers, nor male prostitutes, nor homosexual offender nor thieves nor the greedy nor drunkards, nor slanderers nor swindlers will inherit the kingdom of God.** Be sure of this, that **no fornicator or impure man, or one who is covetous (that is, an idolater), has any inheritance in the kingdom of Christ and of God.** Also see: Leviticus 18:22-25, Romans 1:24-26; 1 Cor. 6:15-19; **Flee from sexual immorality. ... Sins sexually sins against his own body.** 1 Cor. 10:8; We should not commit sexual immorality, as some of them did- and in one day twenty-three thousand of them died. Col. 3:5; 1 Thes. 4:3; For **pro creation**; Gen. 1:28; Mat 19:4-6; For **Spiritual unity**; Gen. 2:24;

Side Note

Most Protestants, Catholics, and society at large do not realize that **the use of contraceptives within the bonds of marriage was taught to be a grave moral sin against Christ, God and family by all Christian churches up until the 1930's.** The church of England, the Anglican church, Episcopaleans was the first Protestant church to shed it's teachings on this subject-- you know that church that now ordains Gay Bishops, and wants to sanctify gay marriages. One by one all of the Protestant churches abandoned this teaching.

The **water shed moment occurred in the 1960's** when finally all Protestant Christians accepted the use of Contraceptives within the bounds of marriage. Even a substantial number of priests, bishops, and Lay Catholics also abandoned the Church's teachings on this matter.

The Christian teachings have been so denigrated from within the ranks of Protestant churches as well as x number of Catholics and society at large that this has become a pet peeve of mine, for multiple reasons. First my lack of understanding of this teaching in the past. Second because our educational establishment our government schools propagation that sex out side of marriage is permissible as long as they contracept. Schools teach abstinence may be the best choice but they have any number of contraceptive options, abstinence is not taught as a moral right and wrong. Instead we teach them how to violate the statutory rape laws which says it illegal for them to be having sex in the first place, and instead teach them state confidentiality laws so they understand where they can obtain all of these reproductive health services without parental knowledge.

Contraception and Marriage

It has been more than 40 years since the Church of Christ has stopped teaching that contraception within the bonds of marriage was considered a grave moral sin against God, Christ and his church. Just what have been the results. Wide spread "conjugal infidelity and the general lowering of morality." Few would deny that the rates of abortion, divorce, family breakdown, wife and child abuse, venereal decease and out of wedlock births have all massively increased since the mid-1960's. Obviously, the birth control pill has not been the only factor in this unraveling. But it has played a major role.

Men in general have lost respect for woman and "no longer care for her physical and psychological equilibrium," to the point that that women are considered "as a mere instruments of selfish enjoyment, and no longer as his respected and beloved companion." In other words contraception might be marketed as liberating for women, but the real "beneficiaries" of birth control pills and devices have been men.

The widespread use of contraception has placed a "dangerous weapon...in the hands of those public authorities who take no heed of moral exigencies." As we have since discovered, eugenics didn't disappear with Nazi racial theories in 1945. Population control policies are now an accepted part of nearly every foreign aid discussion.

Contraception has mislead human beings into thinking they have unlimited dominion over their own bodies, relentlessly turning the human person into the object of his or her own intrusive power...A man and a woman participate uniquely in the glory of God by their ability to co-create new life with Him. At the heart of contraception, however, is the assumption that fertility is an infection which must be attacked and controlled, exactly as antibiotics attack bacteria. In this attitude, one can also see the organic link between contraception and abortion. If fertility can be misrepresented as an infection to be attacked, so too can new life.

Comprehensive Health Course #9910 (CH)

OR

Abstinence Only Health Course #9940 (AH)

Abstinence

- This is a comprehensive **abstinence-based** human growth and development unit. While abstinence is promoted as the preferred choice, other topics such as the human reproduction system, contraception, options after pregnancy, and confidentiality laws are also discussed.

Sexual Health

- STD's /HIV & AIDS
- Contraception/methods, uses, health risks
- Dignity and self-respect
- Tolerance for sexual preferences
- Information resources
(family, community, self advocacy)

Interpersonal Relationships

- Friendships/Dating
- Family
- Marriage/Lifetime commitments
- Parenting

Protective Behaviors

- Abuse (emotional, neglect, physical, sexual)
- Resistance skills
- Proactive skills
- Self advocacy
- Establishing boundaries
- Levels of intimacy

Reproductive System

- Anatomy/Physiology
- Puberty
- Disorders of reproductive system
- Pregnancy (prenatal care, options after pregnancy, complications)

Value-based Decision Making Textbook: Holt Health

Abstinence

- This is a comprehensive **abstinence** program in which all discussion is centered around abstinence as the **only** accepted healthy choice for teens before marriage. It will focus in depth on character development and the social, emotional, psychological, and physical benefits of practicing abstinence.

Sexual Health

- STD's /HIV & AIDS
- Ineffectiveness of contraception
- Dignity and self-respect
- Not included
- Information resources
(family only)

Interpersonal Relationships

- Friendships/Dating
- Family
- Marriage only
- Parenting

Protective Behaviors

- Abuse (emotional, neglect, physical, sexual)
- Resistance skills
- Proactive skills
- Self advocacy
- Establishing boundaries
- Not included

Reproductive System

- These topics are not included in the curriculum, however an introduction to anatomy, physiology, and puberty were covered in previous elementary and middle school curriculum.

Value-based Decision Making Textbook: Health Skills for Wellness

*State law allows parents to opt their child out of some or all of the human growth and development topics. Alternative class work is provided for students opting out.



A Required Course
with a Choice



Health Education 10

School District of West Allis - West Milwaukee, et al.



Grade 10

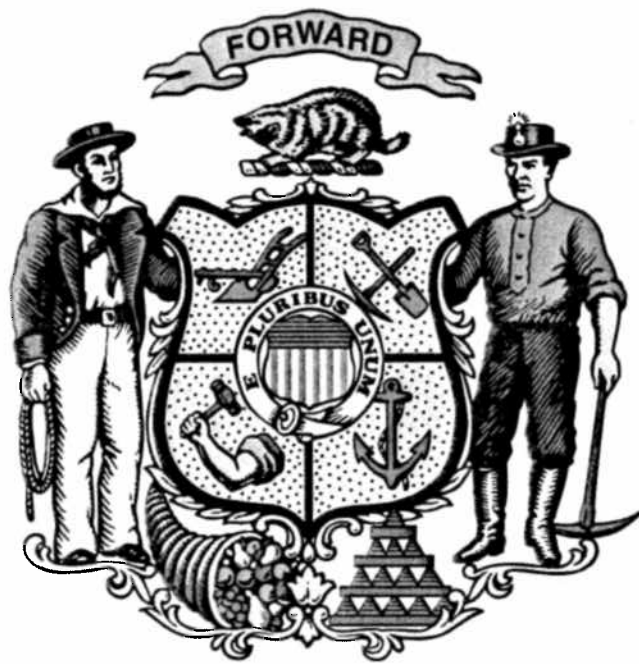
Health Education – Grade 10

Health Education is a required semester course for all 10th grade students. Students may choose either Comprehensive Health (CH) or Abstinence Only Health (AH) to meet their graduation requirement. CH & AH are identical courses with the exception of the Human Growth and Development unit.

The common content units in each course are:

- ❖ Wellness – mental health, stress management, nutrition and weight control
- ❖ Prevention – heart disease, cancer, and other hereditary/congenital diseases
- ❖ Substance Abuse – alcohol, tobacco and other drugs

Details of the Human Growth and Development unit for each course are described inside to assist students and parents in choosing the course that best meets their needs.



Date ?



Testimony in Support of AB 458 – the Healthy Youth Act

My name is Sara Finger and I am the Founder and Executive Director of the Wisconsin Alliance for Women's Health. Our organization is committed to ensuring that all women in Wisconsin, at every age and every stage of their lives, have access to the health care services and information they need to realize their optimal health and well-being. Sadly in Wisconsin, many of our young women are being denied the key services, information and resources they need to truly be their healthiest and most successful.

In Wisconsin and across the nation, we have left our teens in the dark and we have a public health crisis on our hands:

- Approximately one third of young women become pregnant at least once before they reach the age of 20 – with approximately 750,000 teen pregnancies each year in which over 80% are unintended.
- 53% of Latina teens and 51% of African American teen girls will become pregnant at least once before they turn 20. In comparison, only 20% percent of non-Hispanic white teen girls under the age of 20 become pregnant.
- 1 in 4 teens nationwide has at least one STD, with Wisconsin noted for having the 23rd highest Chlamydia rate in the country with Milwaukee having the 2nd highest rate in the county.
- Almost 20% of the new HIV infections in Wisconsin are among teen and young adults age 15-24.
- Girls in high school who reported experiencing dating violence were four to six times more likely to have ever been pregnant than peers who had not experienced dating violence.

These horrible statistics translate to:

- low rates of prenatal care
- high rates of low birth weight babies
- high rates of infant mortality
- high rates of childhood poverty
- high rates of infertility
- high rates of disparities in health outcomes
- low rates of high school completion
- high costs to social costs and high costs to programs like Medicaid

We can no longer tolerate these trends and continue leaving our young people in the dark to face serious consequences for child and family well-being. We cannot stand by, shake our heads in disappointment and wish these problems away. There is something very real and very effective we can do today to curb these rates and improve the health of Wisconsin youth's tomorrow.

The silver lining in this situation is that the public health community in partnership with the government knows how to respond to such challenges. When faced with the explosion of the HIV/AIDS epidemic more than 20 years ago, they were able to launch unprecedented reforms and campaigns to make real progress against the spread of the virus. This is the kind of unity and dedication that we need again today. After too many years of being ignored, the sexual health and well-being of our young people must once again become an important focus issue if we are to ensure them healthy futures.

In order to achieve real and lasting progress, we need to create medically accurate, evidence-based programs that meet the needs of Wisconsin's young people, and give up on the abstinence-only-until-marriage approach that has failed us.

We can rise to the challenge by supporting comprehensive sexuality education that meets the needs of all young people.

Sexuality education is a lifelong process of acquiring information and forming attitudes, beliefs, and values. It encompasses sexual development, sexual and reproductive health, interpersonal relationships, affection, intimacy, body image, and gender roles.

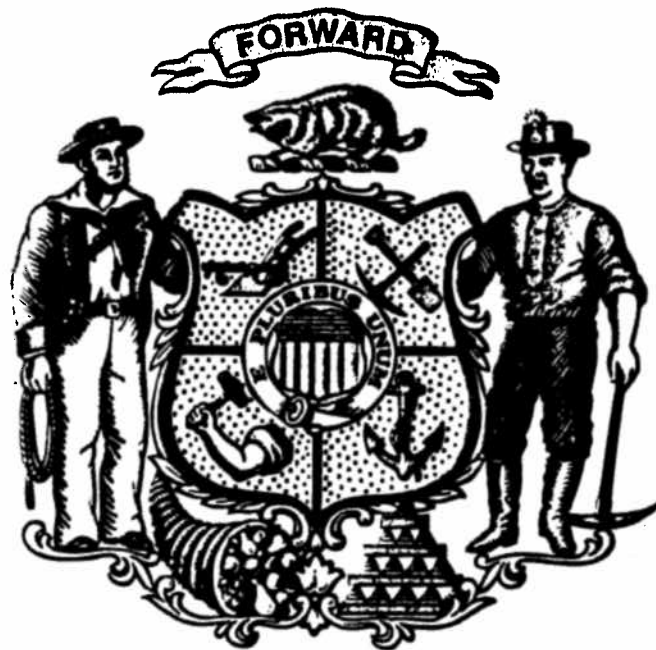
In a 2005 policy report, the American Association of Pediatrics concluded that sexuality education programs that include both abstinence and contraceptive instruction to be effective in reducing teen pregnancy and STD rates.

The Healthy Youth Act ensures that Wisconsin schools that choose to teach sexuality education provide programs that have proven.

As a final note, I just want to remind the committee about the outpouring of organizational and community support this issue has garnered over the last few years. The American Association of Pediatrics, the American Medical Association, the American Public Health Association, among many other leading health organizations support comprehensive sex education programs. And 87% of Wisconsin voters support requiring comprehensive sex education that includes information about both abstinence and contraception.

With this growing support for legislation like the Healthy Youth Act, the voice of women's health advocates grows stronger and more determined to ensure are young people are given the information and resources they need to make healthy and responsible decisions.

I thank you for your time and ask that you pass this bill out of committee and work to schedule a floor vote as soon as possible.



Date ?

Good Afternoon.

My name is Kimberly Wasserman, and I am so grateful to the committee to have this opportunity to testify in support of the Healthy Youth Act, AB 458. I strongly support the Healthy Youth Act, AB 458.

I am a social worker who for the last 15 years has worked with youth. For the past 4 1/2 years, I have been a therapist at the Canopy Center, providing group therapy specifically for young people who have years been sexually abused. Personally, I have worked with children as young as 9 years old all the way through high school, though the agency where I work provides treatment for kids as young as kindergarten. All of these young people are remarkable survivors of sexual abuse. Most of them have had abuse perpetrated against them in their homes by a family member or by a trusted member of their community. 93% of victims of sexual assault knew the offender and 34.2% of those victims were offended by family members.

There are several provisions in this bill that are absolutely critical for children who experience sexual abuse. The first provision in this act that is so important to me and to the youth I work with concerns "teaching students the skills needed to make responsible decisions about sexuality and sexual behavior throughout the pupil's life, including how to refrain from making inappropriate verbal, physical and sexual advances and how to recognize, rebuff and report any unwanted or inappropriate verbal, physical and sexual behaviors."

It is absolutely critical that children be taught this information in school, as it does determine whether a significant percentage of sexually abused children will get the help they need, be able to recover, and hopefully lead healthy and safe lives. When sexual abuse takes place within the home, children are isolated and misinformed by their abusers about what is "normal". Without receiving accurate information at school, a large percentage of the children I work with would not be finally out of the abusive situation and getting desperately needed help.

Sexual abuse is a damaging crime on so many levels. First, there is the physical violence, which can obviously be extremely traumatic and terrifying. But there is also extreme emotional abuse. Perpetrators often tell the child victim that the abuse is a secret, and that something terrible will happen to them or to another beloved family member if they tell about the abuse. This creates a climate of secrecy and shame surrounding the abuse that makes it more likely for it to continue.

For young children, it is very difficult for them to know what types of behaviors are normal and appropriate if they never receive this education. Incest victims often times think that what happens to them in their families happens in other children's families too. Some of the children I have worked with may not have known for some time that the sexual abuse they suffered was wrong without learning this at school. On many, many occasions a child has finally reported the abuse because he or she learned in school what

behaviors are appropriate and what behaviors are not and need to be reported to a trusted adult.

Finally, young children often do not have the language regarding their bodies to clearly express to a trusted adult what is happening to them. Young children need to be taught the appropriate names for their anatomy so that they have the language to communicate when inappropriate sexual or physical behaviors occur. Another provision of this bill addresses teaching children about their anatomy and physiology. Children need to know how to talk about their bodies and know that it's okay to talk to a grown up about it if they have a concern. This goes a long way towards identifying and ending child sexual abuse.

The other important piece of this legislation concerns making sure that children are informed of the counseling, medical and legal resources that are available for survivors of sexual abuse and assault, including resources for escaping violent relationships. Some sexually abused youth do not feel like they have any options for escaping the abuse. Reinforcing and teaching them that they have options and that resources are available to help them does make the difference in the victim reporting what is happening or remaining silent and continuing to endure the abuse. I have been privileged to witness the healing that can occur when survivors of sexual abuse finally connect with an understanding support system. The power of that connection cannot be underestimated and is pivotal in people's lives.

This bill is an important step in making sure all of our school age children in public school get information about sexual abuse they need to escape the violence and get the help they need to recover, and hopefully to go on to lead healthy and safe lives.

Please support the Healthy Youth Act.

Thank you very much.



Date?

Concerned Citizens for Women's Health – Winnebago County

Thank you, Chairwoman Pope-Roberts.

My name is Anne Romond and I am here to testify in support of The Healthy Youth Act/AB 458 on behalf of Concerned Citizens for Women's Health of Winnebago County.

We are a grassroots organization of individuals in Oshkosh and the surrounding area that advocates for and supports programs and legislation to improve all areas of women's health in our community, in the State of Wisconsin and across the nation. We wholeheartedly support this bill and urge your committee to vote to pass it without delay.

Eleven thousand teens in Wisconsin will become pregnant this year, 11,000. That number is staggering. Sixty-five hundred teens will give birth. Teen moms are more likely to drop out of high school, remain unmarried and live in poverty following their pregnancy. Worse, children born to teen mothers are 9 times more likely to live in poverty.

Why wouldn't we—as engaged citizens, as parents, and you, as elected officials—make every reasonable effort to reverse prevent these disastrous consequences in the first place? The Healthy Youth Act is beyond reasonable. It's not a mandate, it's not a one-size-fits-all approach to education, but it is the least we can do.

If a school board opts to teach sex education, it should be taught in an age appropriate, medically-accurate way and should include elements proven to change risky teen behavior. The vast majority of research regarding sex education shows that only comprehensive sex education does this.

The Healthy Youth Act is a commonsense measure that will improve the health of our children and our communities. It's time to put public health ahead of ideology. Please vote to support AB 458. Thank you.

Anne Romond
3111 Quail Run Drive
Oshkosh, WI 54904



Date ?

Good Morning, my name is Pam Scott and I'm here this morning to support AB 458, the Healthy Youth Act.

Healthy youth was the very mission that took me to my first school board meeting in 1991 as a parent. My fifth grade daughter, at that time, came home with a reproduction video for her sex ed class. The video was a mother, in an apron of course, using pancake batter to define the female reproduction system, the ovaries, uterus etc. After attending the school board session to raise the concern of the quality and content of the present program, I became involved in the community based Human Growth and Development Panel and BCHIP – a health organization in the community. The panel met many evenings assuring the comfort of community members, parents and staff and to review current curriculum. Participants wanted to give students good information and the tools they need to make healthy decisions.

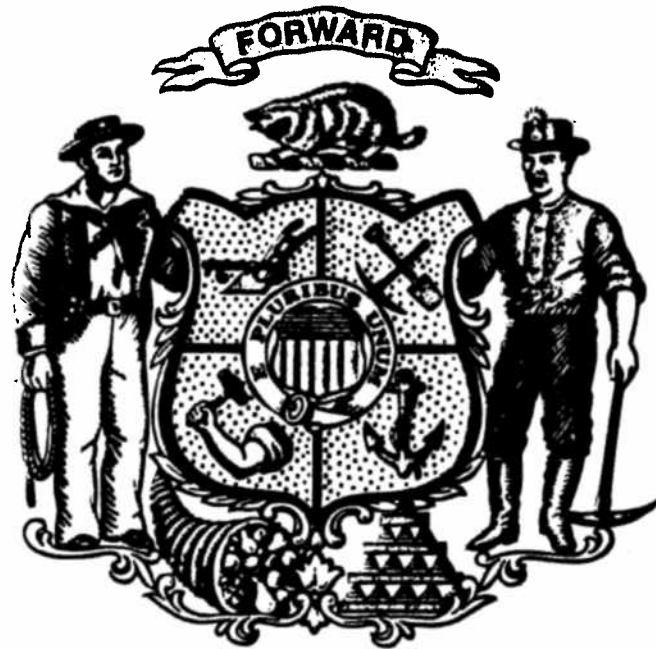
In 2001, I became a school board member of the Belleville School District and I am still on that board. I volunteer on the board because of a common interest and goal to improve our youth's curriculum both educationally and in healthy decision making. In Belleville, we have a great sex ed model, shadowing Madison's curriculum. But not all school districts are so lucky. The Healthy Youth Act encourages and supports boards and communities to adopt good sex ed programs. Personally, I have found community members, including parents very supportive of our comprehensive sex ed model.

I have worked in women's health, with a focus on sexual and reproductive health for over 30 years. During that time, I have seen many youth from many different school district across the state wonder why no one, not their school, or teachers or school nurse, told them how to protect themselves from unwanted pregnancy and STD's. So many teens just don't have the information.

I have seen both male and female patients in an unplanned situation, all they want is to be informed so they can make good decisions for their health and future. Where to go for that information is key. If schools and teachers don't provide that information, where can students go? Many receive information from their peers – good but not good enough. Parental involvement is consistently there but often too late, after the teen's issue or concern arises.

The Healthy Youth Act is so important because it can provide the direction and support for a school board choosing curriculum. It is also important because it sends the strong message that Wisconsin schools agree comprehensive sex education is important for the health of young people throughout Wisconsin.

Pam Scott
7008 Little Lakes Road
Belleville, WI 53508



Faustina Bohling
7514 Tree Lane
Madison, WI 53717

Date ?

Testimony in support of The Healthy Youth Act/AB 458

My name is Faustina Bohling and I am here to urge you to vote to pass AB 458.

My mother was a teen mom at 18 and I was a teen mom at 17. I remember staring at my bedroom wall, pregnant at age 16, thinking that if I could wish things different, I would have.

I am a proud parent and love my son, but I know life would have been different if I knew then what I know now. I went to college and worked hard, but I could have accomplished more, given more to my community, if I had the information I needed to make healthier life choices when I was younger.

Most teen moms, as you've heard by now, don't have the same story I do. Teen mothers are more likely to drop out of high school and they are more likely to live in poverty than their peers without children. Their children, in turn, are more likely to be teen parents themselves. It's a vicious cycle, one that we must empower our children to break.

When I think of the Healthy Youth Act, I think of my daughter and other children who share her legacy. I am trying to teach her a vision for the future where she is happy and healthy as a result of good life choices. I wish the same for all children and teens. But not all teens have the information and support they need at home.

Some youth, such as me when I was younger, have pasts filled with abuse, which tend to add a sense of urgency to the search for a knight in shining armor, not understanding the bigger picture—the repercussions of hasty sexual decisions and naïve relationship choices.

Because I know what it's like to be that child who needs accurate information and comprehensive sexuality education at school, I support this bill. Because I am now a parent who wants only the best for her kids, I support this bill. Because we know now what we didn't know then, I hope you all will support this bill, too.

Thank you, Chairwoman Pope-Roberts, for the opportunity to share my story with you and your committee members today.