

11hr\_SC-Ed\_sb0237\_pt04



(FORM UPDATED: 08/11/2010)

## WISCONSIN STATE LEGISLATURE ... PUBLIC HEARING - COMMITTEE RECORDS

### 2011-12

(session year)

### Senate

(Assembly, Senate or Joint)

### Committee on Education...

#### COMMITTEE NOTICES ...

- Committee Reports ... **CR**
- Executive Sessions ... **ES**
- Public Hearings ... **PH**

#### INFORMATION COLLECTED BY COMMITTEE FOR AND AGAINST PROPOSAL

- Appointments ... **Appt** (w/Record of Comm. Proceedings)
- Clearinghouse Rules ... **CRule** (w/Record of Comm. Proceedings)
- Hearing Records ... bills and resolutions (w/Record of Comm. Proceedings)
  - (**ab** = Assembly Bill)                      (**ar** = Assembly Resolution)                      (**ajr** = Assembly Joint Resolution)
  - (**sb** = Senate Bill)                              (**sr** = Senate Resolution)                              (**sjr** = Senate Joint Resolution)
- Miscellaneous ... **Misc**

\* Contents organized for archiving by: Stefanie Rose (LRB) (December 2012)

To: Senate: Public Hearing: Committee on Education

Wednesday 19 October, 2011 A.D.

Good afternoon members of the committee and members of the public. My name is David Stouvenel.

I have served honorably in the United States Army as an infantryman in the jungles in Vietnam and subsequent to that I served as a hospital corpsman in the United States Navy.

It is my hope that this proposed legislation will be passed into law as a first step in eliminating bad, junk and subversive legislation through the constitutional repeal process. This is the only peaceful way we can restore Christian liberty.

My reasoning for speaking in favor of this legislation begins with the legal maxim that "the denial or perversion of justice by the sentences of courts, as well as in any other manner, is with reason classed among the just causes of war" (see Federalist #80)

What, if anything, could be more perverse than lying to children and/or exposing them to material that could corrupt them, in the name of education in the classroom!

This is how serious and important passing this legislation is.

A bit of important background is necessary if a clear understanding is to be comprehended.

During the 83<sup>rd</sup> congress between 1953 and 1954 a series of hearings were held to investigate tax exempt foundations. The informal name for these hearings was the Reece committee. The general counsel for this investigation was a man named Rene A. Wormser. He later wrote an amazing book titled *Foundations: Their Power and Influence* which reveals the very stunning fact that several major foundations including the Carnegie Endowment for International Peace, the Ford Foundation, the Rockefeller Foundation and several others had interlocking directorates, and an agenda to undermine our free enterprise system and our Christian moral beliefs, with a large emphasis on influencing our society in a Marxist-collectivist direction through our public education system. During these hearings the criminally derived fraudulent body of work by Dr. Alfred Kinsey was investigated. Dr. Kinsey was the man that established credentialed material regarding human sexuality, and therefore, the source for health and sex education in the public schools.

Dr. Judith Reisman did an extensive investigation of Alfred Kinsey and reported on his junk science and criminal activities in her seminal work titled *Kinsey: Crimes and Consequences*. Chapter 8 reveals how the giant foundations, with the Rockefeller Foundation apparently leading, used Dr. Kinsey's junk science to undermine 53 laws that protected women and children that are known as the Comstock laws, to then impose their subversive *Model Penal Code*.

The two books I have named are must read volumes for every legislator in America, along with the book by Ryan Sorba titled *The "Born Gay" Hoax* to appreciate the depth of chicanery and depravity being employed against us by both foreign and domestic enemies.

My website is [www.genuinechristianitynow.com](http://www.genuinechristianitynow.com). There is a button titled *Norman Dodd Part 4*. This six part you tube interview is also a very valuable source of information for every legislator. In part 4 Mr. Dodd reveals the fact that the trustees of the Carnegie Endowment for International Peace decided to establish their own stable of historians, which they did, then sent them to London to get instructions. This begs the question, What instructions did these historians receive from their British instructors at London? And who did the instructing?

Mr. Norman Dodd was the director of research for the Reece Committee hearings.

In my opinion the most important thing we must rapidly realize is that a foreign enemy that has already made violent warfare against us Americans twice has for a very long time been making financial, political, economic and educational war against us gradually and incrementally, and that we must stop them!

The 1823 Johnson v M'Intosh supreme court opinion asserts the fanciful notion that the English crown rules over America as a result of discovery and conquest. I absolutely reject this opinion.

We must throw off all false claims asserted by the British "royals" and their loyalist agents so that we can one day soon enjoy the blessings of Christian liberty, peace and self determination.

Passing this legislation is an excellent first step toward evicting the "royal" British enemy.

Thank you for proposing this excellent piece of legislation.

officer who may conduct litigation in which the People of the State are the real party in interest." *People ex rel. Scott v. Briceland* (1976), 65 Ill. 2d 485, 495. Under *Fergus* and its progeny, any attempt to authorize any other officer to conduct litigation in which the State is the real party in interest would be an impermissible interference with the Attorney General's constitutional powers and an appropriation to another agency to be used directly for such purposes would be unconstitutional and void.

The powers generally understood to belong to the Attorney General at common law have been summarized as follows:

" \* \* \*

\* \* \* 1st. To prosecute all actions, necessary for the protection and defense of the property and revenues of the crown. 2d. By information, to bring certain classes of persons accused of crimes and misdemeanors to trial. [3rd.] By *scire facias*, to revoke and annul grants made by the crown improperly, or when forfeited by the grantee thereof. 4th. By information, to recover money or other chattels, or damages for wrongs committed on the land, or other possessions of the crown. 5th. By writ of *quo warranto*, to determine the right of him who claims or usurps any office, franchise or liberty, and to vacate the charter, or annul the existence of a corporation, for violations of its charter, or for omitting to exercise its corporate powers. 6th. By writ of *mandamus*, to compel the admission of an officer duly chosen to his office, and to compel his restoration when illegally ousted. 7th. By information in chancery, to enforce trusts, and to prevent public nuisances, and the abuse of trust powers. 8th. By proceedings *in rem*, to recover property to which the crown may be entitled, by forfeiture for treason, and property, for which there is no other legal owner, such as wrecks, treasure trove, &c. (3 Black. Com., 256-7, 260 to 266; *id.*, 427 and 428; 4 *id.*, 308, 312.) 9th. And in certain cases, by information in chancery, for the protection of the rights of lunatics, and others, who are under the protection of the crown. (Mitford's Pl., 24-30, Adams' Equity, 301-2.)

\* \* \*

1919-20 Ill. Att'y Gen. Op. 618, 629-30, quoting from *People v. Miner*, 3 Lansing (NY) 396 (1868).

While many of these powers now have a statutory basis, the significance of the common law powers still must be understood from the perspective of the interests represented. Representation of the Crown is translated in our system to representation of the People thus, serving the public interest is established as the paramount obligation of the Attorney General. Further, these powers fix the core of the powers to be exercised by the Attorney General. While they may be expanded upon, nothing in this basic core can be transferred or exercised by any other officer.

At the same time that the Constitution created the Office of Attorney General in what has remained its form to this day, it changed the Office of State's Attorney from the form in which it had been previously known to its present form. The Constitution provided that at the 1872 election there would "be elected a state's attorney in and for each county in lieu of the [circuit] state's attorneys now provided by law." (Ill. Const. 1870, art. VI, sec. 22.) The incorporation of prior statutory language in legislation pertaining to the new offices as known under the 1870 Constitution left the responsibilities somewhat blurred, or at least closely interrelated. One can find to this day provisions for the commencement of actions in which the people of the State may be concerned (55 ILCS 5/9005(a)(1)) and for representation of State officers by State's Attorneys within their counties. (55 ILCS 5/3-9005(a)(4).) As in the 1827 and 1845 Acts, the current law allows the Attorney General to call on State's Attorneys for assistance in matters before the supreme court. (55 ILCS 5/3-9005(a)(8).) There is also a sharing of responsibilities in the area of criminal prosecution. (See, 15 ILCS 205/4.)

The Illinois Constitution of 1970, generally effective on July 1, 1971, continued the Office of Attorney General as it had been established under the 1870 Constitution. The Office of Attorney General is created in article V, section 1, and is described specifically in section 15 of article V, which provides as follows: "The Attorney General shall be the legal officer of the State and shall have the duties and powers that may be prescribed by law." While there was some discussion in the course of the Constitutional Convention concerning a possible limitation on the powers of the Attorney General, given the clear understanding from *Fergus v. Russel* that the prescription of powers by law was inclusive of the broad powers enjoyed by the Attorney General under the common law, the Convention included language that did not differ in import or effect from that in the 1870 Constitution. [Note: In their book *The Illinois Constitution: An Annotated and Comparative Analysis* (Institute of Government and Public Affairs, University of Illinois, Urbana (1969)), prepared for the Illinois Constitution Study Commission, George D. Braden and Rubin G. Cohn suggested, at p. 360, that reversion to the language of the 1818 Constitution ["regulated" versus "prescribed" by law] would "introduce adequate flexibility in allocating legal work within the Executive Department." The Convention did not opt for this suggested alteration.]



**Staudenmayer, Suzanne**

---

**From:** Rep.Taylor

**Sent:** Wednesday, October 19, 2011 4:06 PM

**To:** Sen.Olsen; Sen.Vukmir; Sen.Darling; Sen.Grothman; Sen.Cullen; Sen.Larson; Sen.Vinehout

**Attachments:** SB 237 Testimony.pdf

Dear Senate Committee on Education members,

Attached is my testimony on SB 237. Thank you.

Sincercerly,

Chris Taylor  
State Representative  
48th District



CHRIS TAYLOR

STATE REPRESENTATIVE

9th DISTRICT ASSEMBLY DISTRICT

### TESTIMONY OF REP. CHRIS TAYLOR IN OPPOSITION TO SB 237

Thank you for the opportunity to testify in opposition to SB 237 today. The intent of this bill is clear—to repeal the comprehensive sex ed curriculum law passed last session. Current law ensures that human growth and development programs, if taught, are comprehensive, age-appropriate and medically accurate. This bill eliminates the current requirement that if taught and if age-appropriate, contraception be included in the discussion of pregnancy and STI prevention. In fact, contraception and barrier methods are not even mentioned in this bill. If this bill is adopted, teen pregnancy prevention efforts will be set back decades.

First, I take great exception to the authors' attempt to characterize this bill as an effort to restore local control. Given the funding decimation of the public schools that occurred earlier this year, which tied the hands of school districts and restricted their ability to raise the funds locally they determine they need to educate their students, I don't know how any person who is sponsoring this bill or sitting on this committee could raise the issue of local control with a straight face. I am the mother of a kindergartener and in his public school, we have to buy our children pencils to use. That is what you did to local control earlier in this session. It is the height of hypocrisy to advance this bill under the veil of restoring local control.

In fact, this bill erodes local control and erodes parental involvement. Current law requires school districts to appoint a committee to determine sex ed curriculum that is made up of "parents, teachers, school administrators, pupils, health care professionals, members of the clergy and other residents of the school district." This bill enacts strict new limits on who should be on that committee, limiting parental participation to 20% of the committee and allowing only 25% of the committee be affiliated with the school district. This is heavy handed government at its worst, dictating to the local communities how many parents and teachers are allowed to make curriculum decisions and limiting parental involvement.

I would hope that we at least can agree on making sure that the instruction our children receive in human growth and development is medically accurate. But the authors of the bill don't seem to agree because they have substantially changed the definition of "medically accurate" in this bill. They have eliminated the requirement that medically accurate information is supported by the weight of research conducted in compliance with accepted scientific methods and that the information is recognized as accurate by leading professional organizations in the country.

This is because the organizations behind this bill are very much anti-science especially when it comes to reproductive health care. These are groups that believe 90% of women in this country are having abortions every month when they take a birth control pill. These are groups that believe a fertilized egg in a petri dish can walk and talk and should be treated as a person. These are the groups that believe talking about birth control causes students to run out and have sex, despite no evidence to support this illogical belief. These are the groups the authors are listening to in advancing a definition of medically accurate that is distinctly anti-science and doesn't comport with basic evidentiary standards.

The reality is that we have a public health crisis in this state and throughout our country. I know many members of this legislature don't not want to hear this, but it is unfortunately true. Teens are sexually active (According to the 2009 Wisconsin Youth Risk Behavior Survey, 41% of high school students in grades 9-12 in Wisconsin report that they are sexually active), they are engaging in risky behaviors and not using protection or birth control. As a result, teen girls are getting pregnant and they're having babies. And, teens are contracting STDs at an alarming rate. According to the U.S. Center for Disease Control and Prevention, 1 in 4 teenaged girls have a sexually transmitted infection (STI). In Wisconsin, the average Chlamydia rate (Chlamydia being the most common STI) is 371 incidents per 100,000. For Wisconsin teens, the rate is 1,893 per 100,000 women ages 15 through 19. This is an increase from 2009 when the rate was 1,806/100,000. (Rates found in Sexually Transmitted Disease in Wisconsin, 2010). As alarming, 27% of all new HIV cases in Wisconsin occur in young people ages 15-24. This also rose in 2010 from 20%.

The Wisconsin Department of Health Services estimates that in one year alone, Wisconsin spends \$117 million annually on the direct medical costs of STDs among youth aged 15-24. And teen child bearing in Wisconsin cost taxpayers at least \$168 million in 2008 (The National Campaign to Prevent Teen Pregnancy, the Public Costs of Teen Childbearing in Wisconsin, 2011).

If we had H1N1 infections at this rate, or any influenza, this body would probably be calling out the National Guard. Instead, this bill takes us back to once again, sticking our heads in the sand.

And the frustrating part is we know from all of the studies that have been done, what we need to do to have the best chance of reducing teen pregnancy and birth, and reducing the horrible incidents of STIs. In fact, the current law embodies the best practices that have been shown to change risky teen behavior and the alarming health outcomes we see in our state. What is the harm in giving the new law a fair chance to at least see if it will work?

Other countries utilize the comprehensive approach embraced by current law and have significantly lower incidents of teen pregnancy, birth and STIs. The United States have the highest incidents of teen pregnancy, birth, abortion and STIs than any industrialized country in the world.

The United States' teen pregnancy rate is almost three times that of Germany and France, and over four times that of the Netherlands according to the studies conducted by Advocates for Youth.

The United States' teen birth rate is nearly eight times higher than that of the Netherlands', over five times higher than France's, and over four times higher than Germany's.

In the United States, the teen abortion rate is twice that of Germany and more than 1.5 times that of the Netherlands.

The percentage of the United States' adult population that has been diagnosed with HIV or AIDS is six times greater than in Germany, three times greater than in the Netherlands, and one-and-a-half times greater than in France.

What do the Europeans know that we don't? The answer is not very complicated and comes down to several factors, including comprehensive education and health care:

- European governments strongly support education and run massive public health campaigns encouraging safe sexual behavior.
- Teens have access to health care, including contraception, through national health insurance plans.
- Sexuality education is integrated across school subjects at all grade levels. Parents support the role of educators and health care providers in making this information available to teens.
- Research is the basis for public health policy to reduce unintended pregnancy and STIs—not politics and religion. (AFY, Sept. 2009).

Despite the fact that European youth are receiving information about and access to contraception, they delay sex on the average of 1 to 2 years longer than American teens. A 2007 reporting reviewing 115 evaluations of U.S. sex education curriculum found that none of the programs discussing abstinence and contraception increased the onset of sexually activity or the frequency of sex among teens.

Let's get real. The existence of contraception is not the reason teens think about and have sex. In our culture, sex is all around us—on television shows, in advertising, on the news even. Kids see sexual references every single day. And education about contraception certainly did not create the public health crisis we are in—in fact, the research shows quite the opposite.

This bill is absolutely contrary to the successful approach adopted by many other countries. Rather than helping students develop skills and giving them information to avoid unintended pregnancies and disease, this bill emphasizes teaching students how to have a healthy pregnancy and what kinds of supports are available for teens who have babies. It completely eliminates current provisions that focus on skills each student needs to develop to make responsible decisions about sexuality and sexual behavior throughout a student's life.

This bill contains flat out medically incorrect information. At two different places in the bill, it states that abstinence is the only reliable way to prevent pregnancy and STIs. This bill dictates that students must be told this medically incorrect information if they receive human growth and development instruction. What is correct, and what the current law says, is that abstinence is the most effective way to prevent pregnancy and STIs, but it is certainly not the only reliable way. Various birth control methods are extremely reliable in preventing pregnancy and STIs if used correctly. But this fact is totally omitted from this bill.

Further, this bill adds a provision that students should be taught the nature and treatment of sexually transmitted infections without even mentioning STI prevention except abstinence. When we have an STI rate among teens that we have in this state, not mentioning barrier methods as a way to reduce STI exposure is simply unconscionable. It is like going to Africa and telling people dying of AIDS that condoms are ineffective in preventing transmissions. This omission could be a death sentence for some students who will go on to contract HIV/AIDS.

The bottom line is that this bill furthers anti-contraception propaganda perpetuated by a few extreme groups in this state and repeals key provisions in the bill about teaching students about contraception as a way to avoid pregnancy and prevent STIs. Contraception is not even mentioned in the bill as a method to prevent pregnancy or infection. What an irresponsible bill. As a parent, I am horrified by this bill.

This bill also eliminates a really important provision nondiscrimination provision in the statutes that students not be discriminated against in instructional methods or materials based on race, gender, religious, sexual orientation, or ethnic or cultural background.

And as a parent, I am additionally appalled that parents are, once again, left in the dark. This bill eliminates the rights of parents to be notified when children don't receive the comprehensive human growth and development instruction that most parents assume their children are getting. It is really an insult to all parents who are attempting to be involved in their children's education.

This bill forbids volunteer health providers from teaching sex ed. Aren't these exactly the people we want to be teaching sex ed?

This bill also forbids the state from appealing for federal monies for pregnancy prevention efforts. This is an absolutely irresponsible prohibition, especially given the economic condition of our state that the sponsors of the bill continually reference to justify the slashing of key programs like Medicaid.

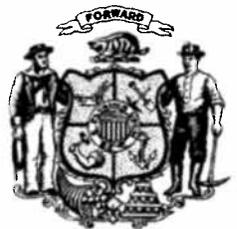
And that brings me to my last point, about Medicaid. As I was preparing this testimony, I was also preparing testimony opposing the cuts proposed by DHS to our Medicaid program. Right in the preamble to the cuts, one of the significant costs that Dennis Smith identified is paying for Medicaid births. In Wisconsin, 88% of all teen births are paid for by the Medicaid program, costing the state over \$27 million in 2008 for just labor and delivery costs. This is not a statistic we should be proud of. It is shameful. What we know is that the way to prevent teens from getting pregnant is through education and access to services. Yet this administration and this legislature are considering cutting both at the same time. What a terrible idea with disastrous consequences.

This is one of the most irresponsible bills I have seen this session. It will set pregnancy prevention efforts back decades. I urge you to give the more comprehensive human growth and development approach adopted in current law a chance. Our students deserve the best chance to have bright and prosperous futures. We owe them that.

Thank you.



WISCONSIN STATE LEGISLATURE



October 25, 2011

Dear Members of the Senate Education Committee,

As co-chairs of Milwaukee's Teen Pregnancy Prevention Oversight Committee and President and CEO of United Way of Greater Milwaukee, we are incredibly proud of the strides our community has made towards reducing births to teens. As reported in the Milwaukee Journal Sentinel earlier this month, the City of Milwaukee announced a 13.6% drop in the teen birth rate to historically low levels. Health Department data show that there were 35.7 births per 1,000 females aged 15-17 years old in 2010. The current trend indicates that we should be on track to reach our goal of 30 births per 1,000 by 2015, a goal which we announced in 2008.

When given the facts, young people are able to make better decisions, and we are seeing the results. But we still have work to do. We know that implementing evidence-based curricula has been a key strategy to achieving these results. It's important that we maintain this commitment to ensure the numbers continue to decline.

Unfortunately, SB 237, the legislation authored and introduced by Senator Mary Lazich, would greatly compromise our efforts that have been working, as well as hinder other communities' ability to achieve the same success we have seen in Milwaukee.

This bill shifts the focus of sex education away from aiding Wisconsin youth in making safe, healthy, responsible decisions to an antiquated curriculum that focuses on abstinence-only until marriage. Contrary to the Senator's statement that the HYA provides for a "cookie cutter approach" — the Healthy Youth Act simply recognizes that there are core health education standards that must be taught, just as there are those within math, science and English curricula. While each community in the state is indeed unique, there are common experiences and issues shared by all youth, regardless of their neighborhood. By assuming that somehow Milwaukee's issues do not pertain to the rest of the State, the Senator and other sponsors are clearly not taking the data into account — the 2010 Youth Risk Behavior survey indicated that over 40% of Wisconsin high school students have had sexual intercourse. Teen pregnancy is not a Milwaukee phenomenon.

The Healthy Youth Act is sound public policy. It is imperative that Wisconsin's Legislature vote no on SB 237.

Sincerely,

Bevan Baker  
City of Milwaukee Health Commissioner  
Co-chair, Teen Pregnancy Prevention  
Oversight Committee

Elizabeth Brenner  
Publisher, Milwaukee Journal Sentinel  
Co-chair, Teen Pregnancy Prevention  
Oversight Committee

Mary Lou Young  
President and CEO, United Way of Greater Milwaukee



**Ertel, Lindsi**

**From:** Julaine K. Appling [jkappling@wifamilyaction.org]  
**Sent:** Wednesday, November 02, 2011 7:23 AM  
**To:** Julaine K. Appling  
**Subject:** State Senators: Wisconsin Family Action urges a "yes" vote on SB 237, the "Strong Communities...Healthy Kids Act"  
**Attachments:** image001.jpg; senate\_SB237\_110211.pdf



PO Box 1327 • Madison WI 53701-1327  
 608-268-5074 (Madison) • 866-849-2536 (toll-free) • 608-256-3370 (fax)  
 Email: [info@wifamilyaction.org](mailto:info@wifamilyaction.org)  
 Blog: <http://blog.wifamilyaction.com>  
 Web site: [www.wifamilyaction.org](http://www.wifamilyaction.org)

---

## LEGISLATIVE MEMORANDUM

To: Members, Wisconsin State Senate

From: Julaine K. Appling, President

Date: November 2, 2011

Re: Supporting "Strong Communities...Healthy Kids Act," SB 237

Wisconsin Family Action (WFA) urges you to support SB 237. This "Strong Communities...Healthy Kids Act" is designed to do one primary thing: restore to school districts the option of developing and implementing a Human Growth and Development program that is of their choosing, rather than having to comport with the one-size-fits-all approach required by current law—or have no program at all.

Highlights of SB 237 include the following:

- SB 237 is structured to give school districts recommendations for their Human Growth and Development programs, rather than mandates as in the current law. In doing so, districts can develop a program that best reflects the values of parents and community members.
- SB 237 does not require that schools change their Human Growth and Development programs—unless they choose to do so. However, if they choose to change and do a curriculum that presents a holistic approach to abstinence or choose to implement some other approach, they may do so under this bill. SB 237 respects the choices of the local school districts in this matter.
- SB 237 has certain minimal requirements if a school district decides to have a Human Growth and Development program, including presenting abstinence from sexual activity as the preferred behavior choice for unmarried students, emphasizes that abstinence from sexual activity before marriage is the only reliable way to prevent pregnancy and sexually transmitted diseases, provides instruction in parental responsibility and the socioeconomic benefits of marriage, explains pregnancy, prenatal development and childbirth, and explains the criminal penalties for underage sex and the sex offender registry.
- SB 237 encourages strong relationships and cooperation between parents and the schools for the sake of the "optimal health and well-being" of the children.

Wisconsin Family Action urges you to support SB 237, the "Strong Communities...Healthy Kids Act," as a responsible and reasonable approach to Human Growth and Development. It respects the right of local

schools, in cooperation with parents and community members, to determine their own sex ed program, recognizing that they are the ones best equipped to do so. Restoring this choice to schools is most assuredly in the best interest of the students.

If you have questions, please feel free to contact me at 608-268-5074.

**Julaine K. Appling, President  
Wisconsin Family Action**

PO Box 1327 \* Madison WI 53701

1-866-849-2536 (toll-free) \* 608-268-5074

[jkappling@wifamilyaction.org](mailto:jkappling@wifamilyaction.org)

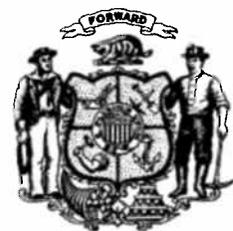
[www.wifamilyaction.org](http://www.wifamilyaction.org)

*\* Strengthening and preserving marriage, family, life and liberty in Wisconsin \**

Check out WFA's blog, *Wisconsin Family Voice—Speaking Up for Wisconsin's Families!*



# WISCONSIN STATE LEGISLATURE



**Ertel, Lindsay**

---

**From:** Wisconsin Right To Life [legis@wrtl.org]  
**Sent:** Wednesday, November 02, 2011 8:03 AM  
**To:** Wisconsin Right To Life  
**Subject:** Please vote for SB 237

**TO:** State Senators

**FROM:** Susan Armacost, Legislative Director

**RE:** Wisconsin Right to Life urges your support for SB 237 (Strong Communities - Healthy Kids Act)

Senate Bill 237 will be on the floor of the Senate today for your consideration. Wisconsin Right to Life urges you to support this important and reasonable piece of legislation.

When Act 134, the so-called Healthy Youth Act, was enacted in 2009, Wisconsin Right to Life strongly opposed its enactment. Under Act 134, local school districts offering a human growth and development curriculum are prohibited from teaching an abstinence-only approach to sex education. Wisconsin Right to Life believes the education of Wisconsin's young people in this area belongs under local control...not state control. If a local school district wants to teach an abstinence-only approach to their students, they should be able to. Abstinence is the healthiest course for our young people to take and is the only way to insure that sexually transmitted diseases, pregnancy and abortion will not result. Local school districts and parents should have the ability to select an abstinence-only approach to teaching sex education if that is what they want to do.

Senate Bill 237 would return local control to school districts so they once again have the ability to model their sex education curriculum according to local community standards.

Wisconsin Right to Life urges you to support Senate Bill 237.

Thank you.

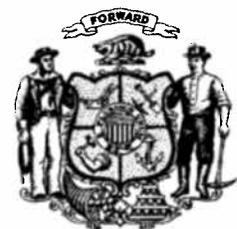
Susan Armacost, Legislative Director

**Wisconsin Right to Life**  
9730 W. Bluemound Ave., Suite 200  
Milwaukee, WI 53226  
414 778-5780 Ext. 202  
Email: legis@wrtl.org  
<http://www.wrtl.org>

Follow us on [Facebook](#) and [Twitter](#)!



# WISCONSIN STATE LEGISLATURE



# Pro-Life Wisconsin



*Defending them all...*

P.O. Box 221      Brookfield, WI 53008-0221  
Phone (262) 796-1111      Fax (262) 796-1115  
info@prolifewisconsin.org      www.prolifewisconsin.org

November 2, 2011

TO:            Members, Wisconsin State Senate

FROM:        Matt Sande, Director of Legislation

SUBJECT:    **Support for Senate Bill 237 – “Strong Communities...Healthy Kids Act”**

---

Pro-Life Wisconsin urges you to vote for Senate Bill 237, the “Strong Communities...Healthy Kids Act,” legislation that would give local public school districts the option to adopt abstinence-only human growth and development curricula and would prohibit school-based health volunteers from providing human growth and development instruction.

Last session the Wisconsin Legislature and Governor Doyle enacted **2009 Wisconsin Act 134**, the so-called “Healthy Youth Act.” The new law prohibits local public school districts from adopting “abstinence-only” human growth and development programs - a freedom and flexibility they enjoyed under previous law. Under current law, if a school district chooses to adopt a human growth and development program it is forced to include in its curriculum instruction on the “health benefits, side effects, and proper use of contraceptives and barrier methods.” This ties the hands of local human growth and development advisory committees – a violation of the principle of local control. These advisory committees include teachers, parents, medical professionals, clergy and others, all of whom work very hard to craft curricula that match the goals and values of their local communities. Forcing a one-size-fits-all state curriculum on them effectively destroys them.

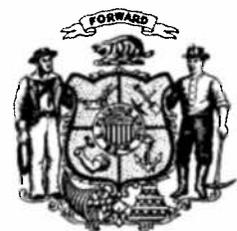
Wisconsin Act 134 also removed a common sense provision in previous law that prohibited school-based health volunteers from providing human growth and development instruction in the areas of human sexuality, reproduction and family planning. Current law permits contraceptive or abortion education by school volunteer health care providers, including those from Planned Parenthood. This may involve a referral to the nearest Planned Parenthood birth control clinic where a child could be given contraceptive drugs and devices or directly referred to one of Planned Parenthood’s abortion clinics. Significantly, school volunteer health providers are considered agents of the state and therefore are immune from civil liability. The state Volunteer Health Care Provider Program confers legal protection on 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. 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, ending in an adverse outcome.

**Senate Bill 237** reverses the contraception education/instruction mandate of 2009, giving school districts the freedom to adopt abstinence-only human growth and development programs. Chastity/abstinence is the only message that will protect our children’s bodies and preserve their innocence, and local school districts should be given this option. It also prohibits school-based volunteer health providers from providing instruction in human growth and development. Sexual development is not properly under the purview of a school health room physician or nurse, especially one from Planned Parenthood. The bill prevents Planned Parenthood nurses and physicians from teaching about abortion and contraception in our public schools.

Thank you for your consideration.



# WISCONSIN STATE LEGISLATURE



# PLANNED PARENTHOOD ADVOCATES OF WISCONSIN

## Save the Healthy Youth Act Vote No on SB 237

My name is Meghan Benson and I'm the Director of Community Education for Planned Parenthood of Wisconsin. Currently, PPWI has six educators that provide age-appropriate and medically accurate sexuality education for students, young adults, parents and families. In 2010, PPWI provided direct education to over 6000 individuals and was invited into dozens of schools for specific sexuality education programs.

I am deeply disappointed by this move to repeal the Healthy Youth Act, a policy that educators know has the potential to address the public health crisis in Wisconsin. Years of rigorous research has shown that the core components found in the Healthy Youth Act work to change high risk teen behavior. This is not a problem to which we don't have an answer, we do. This is why I supported the Healthy Youth Act, along with a coalition of educators, youth activists, students, public health officials, doctors, nurses and parents. We are just beginning to see the impact comprehensive sex ed programs can have on communities. This is not the time to do a complete reversal of policy. Our teens' health and future is too important.

### I. Health educators know that comprehensive sexuality education works.

As the Director of Community Education, I work with teens, families and other educators everyday. About 50% of the direct programming we do is in middle and high schools and the rest is with community organizations. Typically, schools and organizations invite Community Education to present one day programs on a topic they choose. The most requested are basic programs on human anatomy and reproduction; contraception and STD prevention; or communicating with parents about sexuality. Often, the information provided supplements the schools' health courses. Schools are always aware of the program I am going in to teach beforehand and I make any materials available to them prior to the class. I've also met with parent groups in advance of providing education in the schools to share the content and answer any questions they may have.

My role is to give students the facts about their bodies and sexuality. But, as we know, parents are really the prime educators when it comes to these issues. I can provide the health basics, but students look to their parents for their values about sexuality and healthy behaviors. To complement the work I do with students, Planned Parenthood of Wisconsin also offers parent programs that focus on how parents can talk to their kids about sexuality and healthy behaviors. Enhancing that parent-student communication line is a core piece of my work.

We know that young people are more likely than adults to make choices that put their health and safety at risk. But, we also know that when teens have accurate health information and practical skills - such as communication, decision-making, and refusal skills - they are far more likely to make better decisions.

### II. Only medically accurate, age-appropriate sexuality education has been shown to successfully reduce teen pregnancy and STD rates.

There have been dozens of comprehensive sexuality education programs that have been rigorously evaluated and published in peer-reviewed journals. The vast majority have been shown to reduce risky behaviors and decrease negative health outcomes, such as teen pregnancy and STDs. These comprehensive sexuality education programs contain the same core elements as those outlined by Healthy Youth Act.

Abstinence-only, on the other hand, has utterly failed our youth. The overwhelming weight of the research shows that abstinence only programs are not effective in reducing teen sex, pregnancy or STD rates. States that have the highest teen birth rates—Texas, Florida and Georgia, all have a long history with abstinence only. This trend is changing, even among these states. Texas has changed course because their teen birth rate got so high and abandoned abstinence only education. The states that have the lowest teen pregnancy rates, Vermont and New Hampshire, teach comprehensive sex education.

One question I am often asked is: isn't abstinence-only education better than nothing? No, actually, it is not. The bulk of the research shows that abstinence-only programs have no positive effect on teen behavior—these teens are having sex at the same rate, but they are much less likely to use contraception or condoms to avoid pregnancy and STDs. Abstinence-only isn't just ineffective, it's dangerous.

### III. What is medically accurate and age appropriate sexuality education?

Comprehensive sexuality education like that outlined in the Healthy Youth Act provides students with medically accurate information about human anatomy and reproduction. But that's not all. It also empowers students to make healthy decisions by teaching them skills to:

- Avoid dating violence
- Recognize sexual, emotional and physical abuse and seek help
- Encourage healthy relationships with family, friends and dates
- Avoid risky behavior like drinking or using drugs

All of these important elements are included in the current law. SB 237 unravels the critical elements of this law.

Comprehensive sexuality education also must also be age-appropriate. What is taught to a young child is much different than what is taught to a high school student. Examples of age-appropriate sex ed for various ages are the following:

For children ages 5-8

- Each body part has a correct name and function
- No one should touch the private parts of a child's body except for health reasons or for hygiene.

For children ages 9-12

- During puberty, internal and external sexual and reproductive organs mature in preparation for adulthood.
- Many skills are needed to begin, continue, and end friendships.

For middle school students (ages 12-15)

- The best decision is usually one that is consistent with one's own values and does not involve risking one's own or others' health and safety
- Sexual abstinence is the best method to prevent pregnancy & STDs
- Young people who are considering sexual intercourse should talk to a parent or other trusted adult about their decision and about contraception to preventing pregnancy & STDs

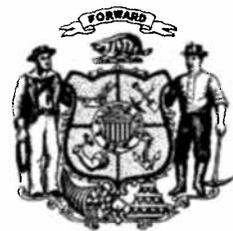
For high school students ages 15-18

- Dating relationships can be enhanced through open, honest communication
- Individuals can help fight STDs by serving as an accurate source of information, by being a responsible role model, and by encouraging others to protect themselves

Maintaining the Healthy Youth Act as it currently exists in state law is so critical right now as a part of our overall efforts to reduce teen pregnancy and STD rates in Wisconsin. This law provides a basic level of guidance for school districts by ensuring that they are aware of, and implementing if they choose, elements of a successful sexuality education program.



WISCONSIN STATE LEGISLATURE



My name is Beverly Beyers. I have a BS as a Home Economics Family Life teacher and had a School Librarian MLS with an advanced 902 teaching license. It fell to my curriculum domain to teach what was in 1974 a senior capstone Home EC. class at most high schools which covered sex, health, human growth and development, budgeting, marriage, parenting and stages of family life. **In order to have my Vocational Home Ec. state license I had to have numerous hours of a state certified teacher who supervised my ability to be present and review my teaching of students.**

During the era in which I taught it became mandated that Planned Parenthood had to be permitted in the classroom to exchange family planning information. *In several WI districts, and several WI cities, the PP spokesperson came in a threw condoms at my students and told the girls to carry them for their guys.* That is not any form of educational engagement in the pro's and con's of safe health practices or abstinence.

Planned Parenthood has been involved in the sale of the fetal baby parts that it harvests in its abortions. Everything PP does is about its economic bottom line and not the ACTUAL interest of the child/student.

**If the state requires teachers to have background checks and student teaching and approval why is that the legislature is circumventing the DPI and allowing non-certified people access to students?**

Most of the PP clinics fall below the sanitation standards of resturants and actually endanger women health. Further, PP never reports to students the connections between suicides, sterilizations and cancers as a result of having had one abortion. The link between the pill and one abortion is an 80% risk of breast cancer. These facts are never shared.

Why with its terrible past track record of being in the schools and throwing condoms at students instead of caution, the lack of truthful information to the mothers about a live child and their own health and its record on the sale of body parts ----- WHY would we as taxpayers and Christians want to allow PP any ANY access to students.???

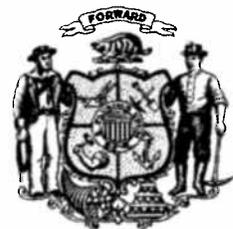
I urge you to vote for the repeal of the former Sex ED bill that was to be taught with PP staff.

The nation is watching your decision on this matter.

Beverly Beyers  
BS Home Ec Education  
MLS School Librarian 902 advanced licensure  
EMT , Hixson Floral Design  
credits in Masters Program in Theology  
Catholic Catechist Certifications.



# WISCONSIN STATE LEGISLATURE



Greetings,

I am a parent of four children. I was also a teen parent. Before I am discredited I would like to also say I am an alumna from UW Madison, a professional working in the area of college access, I am very active in my community and civically engaged.

This bill is important to me because I understand how difficult it is to be a teen parent. I would hate for anyone to unnecessarily go through what I, and many other teen parents, went through. Also, if we care about the state of our economy, we also need to remind ourselves that this boat floats together. This means making sure our youth have what they need to succeed. Including making wise choices with their bodies and their futures.

As a parent, I want my children to be able to talk to me when they have questions regarding sex. I encourage my children to talk openly about sex and being responsible with their bodies. Sometimes they are shy and do not want to talk to me about these things. I would hope that if they didn't turn to me that they had accurate information accessible to them from a trusted source. I trust an agency like Planned Parenthood and other trained adults in this area to be this resource. The last thing I would want is locker room guidance from their peers. Think about where you got most of your information as a kid. Was it from your friends? How much of it was accurate? We all know that poor advice is always out there, ready and waiting and the consequences can be life altering.

Sadly, there are some children who do not have the choice about what happens with their bodies.

I know what it is like to grow up in a household where sex is seen as deviant. Where sexual abuse is the front of one's mind when talking about sex. 1 out of 4 girls have been sexually abused. I was one of them. We learn that sex is shameful. That we are dirty and the conversations around sex is taboo. Who do they have to go to? How can they go about getting the information they need? There are things that happen in a child's life that removes them from accessing the information they need to protect their bodies and futures. The healthy youth act includes components to help youth understand sexual abuse and how to get help. Taking away this component in the classroom could leave young girls like myself with not knowing there is help out there.

By creating a space of openness and open dialogue we remove the space for demonizing sexuality. We remove the shame a woman might feel from abuse, rape or desire to ask her partner to wear a condom. It removes the distance between a woman and her body. It allows young men to look at their rolls and responsibilities without hesitation. Having this shift in responsibility is not a bad thing. Our responsibility as parents, as a community, is to raise our children not to be children, but to be adults. Part of being an adult is owning up to ones' sexual identity and responsibilities.

Not all parents have the full knowledge to have these conversations regarding sex with their children. Some avoid it because their experience was not a positive one or they still have a demonized ideology of sex.

We are human beings. Biologically we are designed to reproduce. This all happens at a rapid rate during the teen years. If teens aren't getting this information, we are doing them a great disservice.

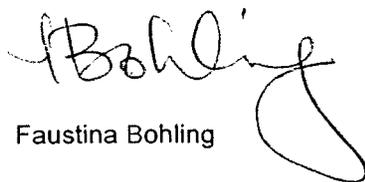
The Healthy Youth Act does not take away the rights from parents, but to help them become more engaged in this part of their children's lives. To empower parents to counteract the misconceptions of sex, the devaluing of respect and sanctity of ones body. Regardless if we like it or not, all you need to do is turn on the TV or listen to the radio to understand the reality our children are living in.

I have to give kudos to Planned Parenthood. They have worked with the community and educators, and have held sessions for parents on how to have these conversations with their children on their own.

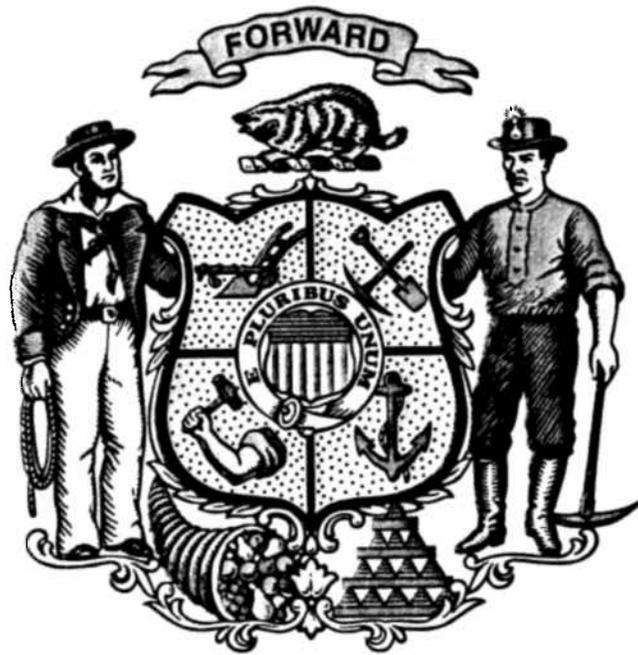
If that isn't proactive, I don't know what is.

I support and believe in the next generation so I support the Healthy Youth Act. I hope you do too and vote no on SB 237.

Sincerely,

A handwritten signature in black ink, appearing to read 'F. Bohling'. The signature is fluid and cursive, with a large loop at the end of the last name.

Faustina Bohling



I rise in strong opposition to bill 237, and with a heavy heart that one of my representatives has contributed to the introduction of this legislation.

The following is a situation commonly exhibited in a Wisconsin Abstinence-Only Health Classroom: Ms. Smith lectures her class filled with approximately thirty 14 year olds about the dangers of sexual intercourse, presenting a dilemma with a reductionistic solution: don't do it. Disregarding the approximately 70% who will have sex by the time they are nineteen. Meanwhile, John in the second row is sexting Jane by the window, while Anna studies for a test presented in a class where she is actually learning something, as opposed to merely being lectured. This class would be a waste of time for the teacher, the students, and a waste of our tax payer's money when it fails to prevent teenaged pregnancy. It is not the responsibility of our state's education system to lecture students; its responsibility is to present solutions to the problems. The problem is not that teens are thinking about having sex, it is that they are having sex-- and when without comprehensive sex ed. uneducated and unsafe sex. Spending forty minutes a day for a semester telling students not to have sex when clearly they are, or will regardless, will not do anything. We must keep the healthy youth act, and must keep educating about preventative methods.

I am a high-school student and lived in the 29th my entire life. I have been fortunate enough to receive a comprehensive sexual education in the Wausau School District. I was educated on how to say no to unwanted sexual encounters and how, if I were to consent, to protect myself from an unwanted pregnancy and sexually transmitted infections. Not only was I educated, but I was informed in a safe and structured environment, with medically accurate and age-appropriate information. Without our schools educating, my peers will turn to Google searches and gossip for answers regarding very serious matters. This is a problem, by passing this bill we are leaving students in our state without accurate information on preventative methods, and I cannot imagine living in a state which has made so much progress, move backwards into oblivion. These abstinence programs misguide our youth, leading us to believe contraceptives are ineffective, causing us not to use them when engaging in sexual intercourse. Without comprehensive sexual education we have students getting pregnant because they believed wearing two condoms would be doubly effective.

Thank you for your time. Although I was unable to cast my vote in last election, I hope my representatives will take into consideration what I want to see happen, and what my peers, approaching voting age, want to see happen.

Ani Djaferian, age 17

1011 Gilbert Street, Wausau, WI

(715)-574-5255