5866501 MOGIVERN

# PRO-FAMILY HAWAII P.O. Box 25158 Honolulu, Hawaii 96825 Phone and Fax: (808) 396-6569

January 29, 2009

LATE TESTIMONY

Testimony on H.B. 329 Jan. 30, 8:30 a.m. before House Realth Committee Room 329

Pro-Family Hawaii, which I serve as president, is opposed to H.B. 329. I believe this Committee should kill this bill.

The bill relies heavily on an old 2004 report. Has the Health Committee distributed a copy to each member? Has it tried to find a more recent study, from 2007 or 2008?

The proof should be produced before such outlandish statements are made in this bill.

Television reports during the January 22, 2009, National March for Life, indicated from college students themselves that many have taken and are keeping commitments to no sexual activity. This was broadcast on EWTN network.

Part of the goal of the elimination of abstinence-only funding, allegedly, is to have our youth "act responsibly and in their best self-interest." Removing this program will do just the opposite-increasing sexual activity, increasing sexually transmitted diseases and increasing abortions. What kind of message are we sending to our youth?

\_\_\_\_

Please hold this bill. Thank you.



Sursing Advocates & Mentors, Onc.

a non-profit organization with a mission to address the global nursing shortage by providing guidance and assistance for nursing colleagues to obtain their professional license in nursing.

P.O. Box 2034 Aiea, HI 96701 E-mail: bramosrazon@aol.com

## **TESTIMONY IN SUPPORT OF HB 329** RELATING TO HEALTH

Jan. 30, 2009 House Conference Room 329

LATE TES

Report Title: Abstinence-Only Funding; Title V; Comprehensive Sex Education

Description: Requires the State to reject all Title V federal funding for mandated abstinence-only-until-marriage programs.

To: Honorable Ryan I. Yamane, Chair Honorable Scott Y. Nishimoto, Vice-Chair Honorable Health Committee Members

From: Beatrice Ramos Razon, RN, FACDONA President, Nursing Advocates Incorporated, Inc. (NAMI)

My name is Beatrice Ramos Razon. As the founder and president of NAMI (Nursing, Advocates & Mentors, Inc.), we are in strong support of this bill. NAMI's membership is comprised of over 75 volunteer nurses, instructors, allied health care professionals, and Filipino leaders, who are dedicated to improve the health of Hawai'i's people by addressing not only a statewide, but worldwide nursing shortage through the training and mentoring of foreign medical graduate nurses, many of whom come from underprivileged backgrounds, to pass Hawai'i's nurses board exams.

Please reject all federal funds for Title V mandated abstinence-only sex education programs that do not provide information on contraceptives, sexually transmitted infections and diseases. Tax payers and parents cannot afford the imposed cost of \$735,000 of state matching funds for a program that has been evaluated and shown to not work. Hawai'i's youth are at great risk during this serious economic crisis. Hawai'i already has the lowest condom use rate in the nation among sexually active teens. As a result, Hawai'i has among the highest teen pregnancy rates, and ranks 6<sup>th</sup> in the nation for Chlamydia infection. Furthermore, in communities where English is not the first language spoken, access to reproductive facts is imperative.

Thank you for the opportunity to provide support for this bill.

Sincerely,

Beatrice Ramos Razon, RN, FACDONA President, Nursing Advocates and Mentors, Inc.

Bea Ramos-Razon, RN, FACDONA President

Tessie Oculto, RN Vice President

D Jun Obaldo, RN, BSN Corresponding Secretary

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Estrella Guevarra, RN

Delmar Magno, RN, C

Edel Matias, RN, CM

Tielito Lyn Matias, RN, BSN

Brenda Monegas, RN

Oscar Querido, RN

Lucy Porte, RNC

Violeta Sadural, RN, BSN

Tina Salvador, RN, BSN, CNN

Ramon Sumibcay, CPT, AN

# PLANNED PARENTHOOD® OF HAWAII

# LATE TESTIMONY

1350 S. King Street • Suite 309 • Honolulu, Hawaii 96814 • Phone: (808) 589-1156 • Fax: (808) 589-1404

January 30, 2009

### **Testimony in Support: HB 329**

To: Representative Ryan Yamane, Chair, and Representative Scott Nishimoto, Vice Chair, and Members of the House Committee on Health

From: Katie Reardon, Vice President of Government & Public Affairs and Sonia Blackiston, Director of Education, Planned Parenthood of Hawaii.

Re: Testimony in Support of HB 329

I thank you for allowing me the opportunity to testify today in support of HB 329, rejecting federal Title V funding that mandates "abstinence-only" sexual health education. Because we find that "abstinence-only" programs fail Hawaii's youth, we fully support this bill.

### I. HB 329 Rejects "Abstinence-Only" Mandates

HB 329, requires the State of Hawaii to reject any federal Title V funding, which requires state matching funds, that requires an "abstinence-only" sexual health education curriculum. Currently, Title V defines acceptable "abstinence-only" education as one that "… teaches abstinence from sexual activity outside marriage as the expected standard for all school-age children;…teaches that abstinence from sexual activity is the only certain way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, and other associated health problems…"<sup>1</sup> This definition excludes the provision of information regarding contraceptives or any other means of preventing the transmission of sexually transmitted infections (STI's), including HIV. In fact, grant applications under Title V prohibit outright the promotion of condoms and other contraceptives. According to Sexuality Information and Education Council of the United States (SIECUS), Federal "abstinence-only" funding spent in Hawaii in 2007 amounted to over \$1 million.<sup>2</sup>

### II. Hawaii's Teens Need Effective Sexual Health Education

Hawaii has one of the lowest rates of teens reporting sexual intercourse. Yet, of those having sex, only 54% are using condoms. That's the lowest rate of condom use among sexually active teens in the country. <sup>3</sup>As a result, we see high rates of teen pregnancy and STI's. Hawaii has one of the highest rates of teen pregnancy in the nation.<sup>4</sup> Nationally, gonorrhea rates are on the rise and other STDs such as Chlamydia and syphilis continue to significantly impact the

Honolulu Clinic 1350 So. King Street Suite 310 Honolulu, HI 96814 (808) 589-1149 Kona Clinic 75-184 Hualalai Road Suite 205 Kailua-Kona, HI 96740 (808) 329-8211 Kahului Clinic 140 Hoohana Street Suite 303

Suite 303 Kahului, Maui, HI 96732 (808) 871-1176

(A Maui United Way Agency)

<sup>&</sup>lt;sup>1</sup> US. Social Security Act §510(b)(2)

<sup>&</sup>lt;sup>2</sup> Sexuality Information and Education Council of the United States (SIECUS),

http://www.siecus.org/index.cfm?fuseaction=Page.viewPage&pageId=671&grandparentID=478&parentID=487.

<sup>&</sup>lt;sup>3</sup> Eaton et al. Youth risk behavior surveillance, United States 2007. Morbidity & Mortality Weekly Report, Surveillance Summaries 2008; 57(SS-4):1-136.

<sup>&</sup>lt;sup>4</sup> Guttmacher Institute, Contraception Counts: Hawaii, www.guttmacher.org/pubs/state\_data/states/hawaii.html

young population. In fact, one in four new STI's occurs in adolescents. <sup>5</sup> And in Hawaii, a 2004 study found that youth aged 15-24 bore the highest burden, experiencing 67% of all Chlamydia infections.<sup>6</sup> Hawaii has the nation's 6<sup>th</sup> highest rate of Chlamydia infection.<sup>7</sup> Clearly, "abstinence-only" sexual health education is failing our teens.

#### **III. "Abstinence-Only" Education Is Ineffective**

A federally funded national study has shown that "abstinence-only" programs are ineffective. This study found that teens who participate in these programs report the same rate of sexual activity than those who don't and also report the same age of first sexual activity, about 14 years old.<sup>8</sup> Furthermore, reliable research shows that students who pledge to remain abstinent report significantly higher rates of other sexual activities, including oral and anal sex. These teens that do have sexual intercourse are one third less likely to use condoms or other forms of contraceptives and are one third less likely to seek medical care.<sup>9</sup>

As of August 2008, 25 States have rejected Title V. SIECUS has reported that 80% of these states did so because the risk of providing inaccurate and harmful sex education to their youth far outweighed the need for federal dollars.<sup>10</sup> The cost to the State of Hawaii is high. Now is a time where we are seeing financial hardship at every turn, especially in our health and human service providers. Title V and it's requirement for state matching funds coupled with the potentially increasing rates of sexually transmitted disease and teen pregnancies puts a heavy and unnecessary strain on those resources.

### **IV.** Conclusion

We ask that Hawaii become the 26<sup>th</sup> state that says no Title V and to "abstinence-only" sexual health education. We promote sex education that, in addition to abstinence, educates young people about prevention of STI's, including HIV, and contraceptives to prevent and reduce teen pregnancy, so that when they do have sex, they do so safely and make responsible choices. By passing this bill, as lawmakers you are supporting our children and teens and putting their health and their lives first. We ask you to pass HB 329. Thank you for this opportunity to testify today.

- <sup>6</sup> Hawaii Department of Health. "Case Rate of Reported Cases of Chlamydia, Hawai`i and US, 1986-2004." <u>http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/figures/stats-chlamydia.pps</u>.
- <sup>7</sup> Id.

<sup>10</sup> SIECUS, Fact Sheet: We're Outta Here: Twenty Five States Withdraw from Title V Abstinence-Only-Until Marriage Funding

<sup>&</sup>lt;sup>5</sup> American Social Health Association, "STD Statistics", <u>www.ashastd.ogr</u>

<sup>&</sup>lt;sup>8</sup> Christopher Trenholm, et. al., "Impacts of Four Title V, Section 510 Abstinence Education Programs: Final Report," (Trenton, NJ: Mathematica Policy Research, Inc., April 2007),, <www.mathematicampr. com/publications/pdfs/impactabstinence.pdf>.

<sup>&</sup>lt;sup>9</sup> Peter Bearman and Hanah Brückner, "Promising the Future: Virginity Pledges and the Transition to First Intercourse," *American Journal of Sociology* 106.4 (2001): 859-912. See also, Peter Bearman and Hanah Brückner, "After the promise: The STD consequences of adolescent virginity pledges," *Journal of Adolescent Health* 36.4 (2005): 271-278.

From: Sent: To: Subject: Grace Caligtan [graceintelligence@gmail.com] Friday, January 30, 2009 8:51 AM HLTtestimony TESTIMONY IN STRONG SUPPORT OF HB 329

LATE TESTIMONY

## **TESTIMONY IN STRONG SUPPORT OF HB 329**

House Committee on Health

January 30, 2009, 8:30 a.m. | Hawai'i State Legislature House Conference Room 329

Report Title: Abstinence-Only Funding; Title V; Comprehensive Sex Education

Description: Requires the State to reject all Title V federal funding for mandated abstinence-only-until-marriage programs.

To: Honorable Rep. Ryan I. Yamane, Chair and

Honorable Rep. Scott Y. Nishimoto, Vice-Chair

Honorable Health Committee Members: Rep. Della Au Belatti, Rep. Joe Bertram, III; Rep. Tom Brower, Rep. Mele Carroll, Rep. Lynn Finnegan, Rep. John M. Mizuno,

Rep. Maile S.L. Shimabukuro

From: Grace Alvaro Caligtan, private citizen, community educator, mother. 1967 Naio Street, Honolulu, Hawaii 96817

My name is Grace Alvaro Caligtan. I am writing as a private citizen, concerned parent, and community educator who has been dedicated to girls and women's well-being for over 15 years.

During these dire economic times, it is difficult to re-evaluate and reject federal revenue streams that bring needed money into our state. However, the community relies on our policy makers to make principled and informed stands, especially when it comes to the health and sexual education of our youth. We cannot afford to continue supporting ineffective abstinence-only education programs that contain misleading and distorted information about reproductive health.

Furthermore, tax payers and parents cannot afford the imposed cost of \$735,000 of state matching funds for a program that has been evaluated and shown to not work. Hawai'i's youth are at great risk during this serious economic crisis. Hawai'i already has the lowest condom use rate in the nation among sexually active teens. As a result, Hawai'i has among the highest teen pregnancy rates, and ranks 6<sup>th</sup> in the nation for Chlamydia infection.

Hawaii's youth need medically accurate, non-judgemental comprehensive sex education so that our youth can make healthier life choices.

As of August 2008, at least 25 states no longer participate in Title V abstinence only until marriage programs. Of the states that have withdrawn, 80% have done so based on strong research and evaluation showing abstinence only until marriage programs are incredibly ineffective. I ask for your leadership in following their lead and charting a new path.

Respectfully,

Grace Alvaro Caligtan

From: Sent: To: Subject: Candace Van Buren on behalf of Rep. Scott Nishimoto Friday, January 30, 2009 8:25 AM HLTtestimony FW: HB329

Bryce,

This came in last night when we were collating.

# LATE TESTIMONY

----Original Message----From: Rebecca deVille [mailto:deville@hawaii.rr.com] Sent: Thursday, January 29, 2009 5:47 PM To: Rep. Scott Nishimoto Subject: HB329

Dear Representative Nishimoto,

I am writing to object to HB329. Abstinence programs only receive \$1 to every \$12 that goes to condom/Planned Parenthood programs that tell kids they are basically animals enslaved to their hormones and can not be expected to wait until they are mature enough for sex.

That denigrates the dignity of our young people and leads to broken lives, abortions and is terrible especially for our young women. Girls are bombarded with sex in popular culture, music, and for years now school. I know, I

grew up in that culture. How are they supposed to have strength to say no? The authority figures are telling them "just be safe". They are not safe.

Condoms are horribly ineffective especially in the young and don't protect against warts and herpes. And most important do nothing to protect young girls hearts.

PLEASE stick to the side that supports the dignity of persons, our young people, especially the girls - they deserve our respect and support!

If it speaks to some young people and encourages them to wait, which we all know is more healthy physically and mentally - why go out of your way to block that message???

Mahalo, Rebecca deVille Honolulu 732.7731

From: Sent: To: Cc: Subject:

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mailinglist@capitol.hawaii.gov Friday, January 30, 2009 1:08 AM HLTtestimony mghsmart@yahoo.com Testimony for HB329 on 1/30/2009 8:30:00 AM

Testimony for HLT 1/30/2009 8:30:00 AM HB329

Conference room: 329 Testifier position: oppose Testifier will be present: No Submitted by: Mary Smart Organization: Individual Address: 94-210 Kakaili Pl Mililani Phone: 627-1220 E-mail: <u>mghsmart@yahoo.com</u> Submitted on: 1/30/2009

Comments: TESTIMONY TO THE HOUSE COMMITTEE ON HEALTH

HB 329 RELATING TO HEALTH, ABSTINENCE-ONLY FUNDING; TITLE V, COMPREHENSIVE SEX EDUCATION

I ATE TESTIMONY

30 January 2009 8:30 AM Conference Room 329, State Capitol, 415 South Beretania St.

By Mary Smart

Chairman Yamane and members of the House Committee on HEALTH

Request you vote NO against HB 329 to reject all Title V federal funding for mandated abstinence only-until-marriage programs (companion to SB778)

There is a large demand for abstinence only sex education for our youth. Senators and Representatives must not eliminate this program and must accept all federal funds for which they are eligible, especially these important Title V funds. Many parents do not want their children exposed to sexually charged information presented in a morally neutral manner. A former abortionist, Carol Everett told everyone that giving comprehensive sex education classes was a mechanism for drumming up business for her abortion clinics. She knew comprehensive sex education would make the students more sexually active than abstinence education.

Using a small study that covered a very short period of time as the foundation of this Bill is unsound. There are many studies that validate the teaching of abstinence only sex education for the health and welfare of students. We must not follow 25 other States over the cliff based on a marginal study.

There are many studies that show abstinence only education is more beneficial than sexual education that focuses on contraception, condoms and abortion as alternatives. We have years of evidence that abstinence only education works. The pregnancy, STD and abortion rates 40 years ago were much lower. We had fewer single mothers caught into the cycle of poverty. There was less spouse and child abuse. I graduated High School without knowing one girl who became pregnant. Since the government started promoting "safe sex" they had to change their mantra to "safer sex" because there is no such thing as safe sex. Condoms fail and other

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contraceptives fail to protect everyone from natural consequences of sexual activity but abstinence never fails when used.

The bill refers to a study from 2004 stating that abstinence programs have contained false, misleading or distorted information about reproductive health. Using such old information gives an indication that since 2004 that perhaps those issues have been corrected. I also believe those same accusations could be made of the comprehensive sex education programs.

The statement that comprehensive sex education empowers students to act responsibly and in their best self-interest is wrong and morally corrupt. What is in their best interest is letting them know they can control their behavior. Living a chaste life prior to marriage will free them from STDs, unintended pregnancies, and regrets that could impact the rest of their lives.

If there are 25 States not taking the funds, I strongly recommend we ask that the funds other States refuse be allocated to Hawaii. Parents should have choice regarding the type of sex education their child receives and when. Parents are the best judge of what is "age" appropriate. By continuing the abstinence only education, in one or two generations we can conduct our own State wide study to see which education is most effective in cultivating happy, productive, successful citizens with fewer unwanted pregnancies and few sexual transmitted diseases.

It is disingenuous to say that abstinence only education does not cover contraception, sexually transmitted diseases including HIV. Medically accurate information is often given so students become aware that sexual activity is the main cause of the transmission of STDs including HIV, that contraceptives and condoms fail and pregnancy could be an unintended consequence of a sexual encounter. They don't need an instruction on how to participate in activities that are potentially unhealthy or detrimental to the physical or emotional well being.

Vote Against this HB 329. Thank you.

From: Sent: To: Subject: Jo-Ann M. Adams, Esq. [jadamsesq@aol.com] Friday, January 30, 2009 1:24 AM HLTtestimony TESTIMONY IN SUPPORT OF HB 329 RELATING TO HEALTH

# HOUSE COMMITTEE ON HEALTH

Rep. Ryan Yamane, Chair Rep. Scott Nishimoto, Vice Chair Friday, January 30, 2009 8:30am State Capitol, Conference Room 329

# LATE TESTIMONY

### **TESTIMONY IN SUPPORT OF HB 329 RELATING TO HEALTH**

HB 329 asks that the State of Hawaii reject all federal funding under Title V that mandates "abstinence-only" sex education be provided to our children and teens. Because we are committed to protecting the health and safety of our young people, we support the passage of this bill.

Title V federal funding currently imposes a mandate that programs receiving funding provide sex education that promotes abstinence until marriage as the only means of preventing pregnancy and STIs. Such education does not provide even basic information about contraceptives, sexually transmitted disease, and HIV. Based on these mandates, our teens have been given inaccurate and ineffective information about their sexual health, placing them at risk for STI's, HIV infection, and teen pregnancy. Hawaii's youth deserve better.

Hawaii has the lowest rate of condom use among sexually active teens in the country.<sup>i[1]</sup> As a result, we see high rates of teen pregnancy and sexually transmitted diseases. A 2004 study reported that 67% of all Chlamydia infections were found in Hawaii's youth aged 15-24 experiencing.<sup>ii[</sup>2]

"Abstinence-only" sex education fails the youth of Hawaii. Our teens must have sufficient, accurate information to keep themselves healthy and safe before they choose to be sexually active.

Jo-Ann M. Adams Law Offices of Jo-Ann M. Adams, LLLC 7 Waterfront Plaza Ste 400 Honolulu, HI 96813

<sup>i[1]</sup> Eaton *et al.* Youth risk behavior surveillance, United States 2007. *Morbidity & Mortality Weekly Report, Surveillance Summaries 2008*; 57(SS-4):1-136.

<sup>ii[2]</sup> Hawaii Department of Health. "Case Rate of Reported Cases of Chlamydia, Hawai`i and US, 1986-2004." Accessed from http://hawaii.gov/health/healthy-lifestyles/std-aids/data-statistics/figures/stats-chlamydia.pps on August 15, 2008.

# LATE TESTIMONESTIMONY IN STRONG SUPPORT OF HB 329

House Committee on Health

January 30, 2009, 8:30 a.m. | Hawai'i State Legislature House Conference Room 329

Report Title:Abstinence-Only Funding; Title V; Comprehensive Sex EducationDescription:Requires the State to reject all Title V federal funding for mandated abstinence-only-<br/>until-marriage programs.

To: Honorable Rep. Ryan I. Yamane, Chair and Honorable Rep. Scott Y. Nishimoto, Vice-Chair Honorable Health Committee Members: Rep. Della Au Belatti, Rep. Joe Bertram, III; Rep. Tom Brower, Rep. Mele Carroll, Rep. Lynn Finnegan, Rep. John M. Mizuno, Rep. Maile S.L. Shimabukuro

From: Amy Agbayani, Ph.D., Private Citizen 3432 B-1 Kalihi St., Honolulu, HI 96734 Charlene Cuaresma, MPH, Private Citizen 728 Nunu St., Kailua, HI 96734

We are in strong support of HB 329. My name is Amy Agbayani. I serve as director of the University of Hawai'i Student Equity, Excellence, and Diversity Program. I am a longtime proponent of civil rights and women's equity measures. My name is Charlene Cuaresma. I have worked as a public health educator for over 30 years to address health disparities in underserved populations. I currently serve as community director for the National Cancer Institute's Asian American Network for Cancer Awareness, Research and Training.

As women of color, Filipino community advocates, educators, and private citizens, we strongly support the passage of HB 329 and its companion SB778, which asks that the State of Hawaii reject all federal funding under Title V that mandates "abstinence-only" sex education be provided to our children and teens.

HB 329 finds that in "December 2004, a report titled "The Content of Federally Funded Abstinence-Only Education Programs" was released that evaluated "the content of the most popular abstinence-only curricula used by grantees of the largest federal abstinence initiative, Special Programs of Regional and National Significance Community-Based Abstinence Education (SPRANS)." The report concluded that "over eighty per cent of the abstinence-only curricula, used by over two-thirds of the SPRANS grantees in 2003, contain false, misleading, or distorted information about reproductive health."

The intent of HB 329 is in keeping with Hawai'i-born President Barack Obama's pledge to discontinue programs that do not work. It also saves the State \$735,000 in matching funds to an individual organization Hawaii organization that has previously received \$162,787 federal funds for a program that has been found to be ineffective.

Research also reveals that abstinence-only approaches in sex education is not enough, and simply is not working. Hawai'i has the lowest rate in condom use among sexually active teens. As a result, Hawaii teen pregnancy rates are among the nation's highest. Hawaii ranks sixth highest in the nation for Chlamydia infection. Filipino women have the highest percentage of late stage cervical cancer, in which HPV, human papillomavirus, a sexually transmitted disease, is a significant risk factor. Filipino women also had three times the rate of HIV/AIDS due to heterosexual transmission, when compared with Caucasian women in Hawai'i.

Your leadership to support this bill is needed to address this reproductive justice issue. Comprehensive sexuality health education is an empowering and science-based approach to equip Hawai'i's youth with knowledge *and* values to make healthy choices to determine the kind of life they want for themselves and for their Aloha State—especially during these dire economic times.

Respectfully,

Amy Agbayani and Charlene Cuaresma

To: Representative Ryan Yamane, Chair Representative Scott Nishimoto, Vice-Chair House Health Committee Members

Une le

TE TESTIMONY

From: Danny Morishige, Program Director II Catholic Charities Hawai'i Mary Jane Program (Try Wait! Program)

Date: January 30, 2008

Place: Senate Health Committee Hearing January 30, 2008 Room 329 8:30 a.m.

### RE: Testimony in opposition to HB 329

My name is Daniel Morishige and I am the Program Director of the Mary Jane Program of Catholic Charities Hawai'i. The Mary Jane Program assists women and teens facing unplanned pregnancies, adoption services, and has a community based abstinence educational program called "Try Wait!" I oppose HB 329.

Our Try Wait! Program is a five-year federal CBAE grant and is currently in our third year. We also had received and completed a three years SPRANS grant. As a program that conducts abstinence education to students it is important that the abstinence message is promoted. The Title V grant has to be applied for before it is granted. There are requirements that information on sexually transmitted infections and HIV is included in their lessons. It is true that no promotion of contraception is covered but there is no prohibition that this information cannot be covered at a later time and place by another party. Also in citing the reference to the December 2004 Waxman's study it is important to note that this study was conducted solely by a partisan committee staff and never submitted to the full Committee on Government Reform for review and there were no Congressional hearing held to discuss this issue and the Waxman Report's. This report is then cited to be as an overall assessment of the accuracy of the abstinence education curricula. The inaccuracies of the Waxman's report are cited in the Abstinence and its Critics staff report for the US House of Representative's Committee on Government Reform, October 2006.

Also in citing the April 2007, Mathematica study as the evaluation that concludes that abstinence education has failed is making a bad precedent by taking a position based on a study of only four early abstinence programs. It would be prudent to examine other studies and other bodies of evidence examining the merits or lack of before deciding to enact a law. Most experts would agree that there is still much more evaluations needed before any meaningful position may be taken.

Lastly the decision to pursue federal funds for any program rests with the executive branch, department heads and others in government services. To enact legislation to refuse federal funds is again setting a bad precedent. This is especially true in these tough economic times when federal and private matching funds are used to provide services to our youths.

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GOVERNOR



PATRICIA HAMAMOTO SUPERINTENDENT

LATE TESTIMONY

STATE OF HAWAII DEPARTMENT OF EDUCATION MOANALUA MIDDLE SCHOOL 1289 MAHIOLE STREET HONOLULU, HAWAII 96819

January 28, 2009

To Whom this may concern,

At Moanalua Middle School, the TRY WAIT program has been an integral part of our Teen Health program for the last five school years effectively reaching every single 7<sup>th</sup> grader. As the lead Teen Health teachers, we've seen the high level of mastery the presenters have over the areas they cover and we find that the methods they use in presenting the information, as well as the various perspectives used have proven to be effective and 'real' to the kids.

The TW presenters have always conducted themselves professionally with their manner and dialect with the students, school personnel as well as with each other. They have always communicated well with the school and lead teachers, have always prompt, as well as flexible and understanding to the last-minute changes the school may have sent in their direction. TW has also collaborated with one of our teachers to produce a standards-based assessment for the lessons presented.

The members of TW have always shown 'heart' and really made connections with both our staff and more importantly, our students, having in the past and recently, agreeing to revisit with our students [post program completion] continuing to make a difference as excellent adult role models.

We, the undersigned, feel that discontinuation of the TRY WAIT program at Moanalua Middle School will create a vast void in the lives of our students for the ever so difficult to find positive role models, a great loss in the expertise the presenters bring to the table, a loss in the many hours of collaborative planning of student assessment, and a real sadness that the younger brothers and sisters of our students will not have the opportunity to experience the TRY WAIT program. We are hoping that whatever differences which are jeopardizing the relationship and curriculum may be worked out, and that we will be able to continue to strengthen what has been built over the past five years. In short, we value what TRY WAIT brings to the table and we will continue to look forward to continuing our relationship with the program and the presenters.

With sincere regard,

Lisa Nagamine – Acting Principal

Lisa Nagamine – Acting Principa

Clete Yokoe HPE Teacher

aura Ospiro HPE Teacher

Kimm Mar

Damian Mew HPE Department Head HPE Teacher

ndrew Hopoi HPE Teacher

AN AFFIRMATIVE ACTION AND EQUAL OPPORTUNITY EMPLOYER

January 28<sup>th</sup> 2009 To Whom It May Concern;

My name is Craig Knohl and I am a Health Educator at Kahuku High and Intermediate School. I am writing this letter on behalf of the Try Wait Program funded by the Catholic Charities of Hawaii.

In the past 5 years that I have worked with the Try Wait members I have been more than satisfied with the program and presentations taught to my 8<sup>th</sup> grade students. The program has always maintained the proper balance of abstinence based education for the students here at Kahuku High and Intermediate School.

I am planning to continue my working relationship with Try Wait on the basis that it is a quality program with very qualified professionally mannered presenters.

If there are any questions concerning the program and its presenters please feel free to contact me at Kahuku High and Intermediate School

Sincerely,

Craig Knohl

Gik M

Health Educator at Kahuku High and Intermediate School (808-293.8950)

Robert P. Woods Kahuku Intermediate and High School 59-290 Kamehameha Hgwy Kahuku, HI 96731

Subject: Try-Wait Program

I have personally witnessed the on-going progress of this exceptional program since their initial involvement, approximately 5 years, at Kahuku Intermediate and High School. The curriculum demonstrates all areas of the learning processes with students' constant mental and social engagement. Additionally the facilitators are in the age group close to the teenage years, young single adults and young marrieds. This aspect enables a close understanding with students.

The program facilitators are adequately prepared to interact with teenagers, and provide relevant information relative to sexuality challenges. Inclusive in the program are comprehensive elements of student involvement. These various processes include Questions and Answers interaction between presenters and students, Visual images such as pictures, graphs and videos and including followup interview homework with parents. Please note that the Try-Wait program incorporates all areas of the Hawaii's Health Standards.

Finally, all health students enthusiastically welcome another outstanding perspective from community resources and I strongly endorse the Try-Wait Program.

Sincerely,

Robert F. Wood

**Robert P. Woods** 

### Faye Ramos

To whom it may concern,

My name is Faye Ramos and my son, Makana Ramos, participated in the Try Wait abstinence education program at Kamehameha Schools. I found this to be an excellent program that provided comprehensive sexuality education. My son stated that the program was relevant, informational and provided helpful demonstrations and skits about sexuality, contraception and disease prevention.

My son was engaged by the program and brought weekly assignments home that generated discussion about what he was learning each week. I appreciated the objective manner in which the information was provided as well as the quality of information he received about contraception options, sexually transmitted diseases and the emotional aspects of a sexual relationship. This program encourages parents and teens to explore their thoughts and feelings about sexuality together through creative, relevant activities.

I was very impressed by the quality of this program and the comprehensive nature of the information provided. This program has positively affected our family and provided my son with much more than "abstinence only" education. I feel that if you discontinue this program it will have a very negative impact on Hawaii's youth. Please feel free to contact me for further information.

Sincerely,

Jaye Sr. Ram

Faye Ramos 737 Akumu St. Kailua, HI 96734 261-4942

LATE TESTIMONY

Sheila Lei Woods Kahuku High School 59-290 Kamehameha Hgwy Kahuku, HI 96731

Subject: Try Wait Program

This letter is in support of the Try Wait Program. This program has been invaluable to our students. They address the Health standard of Sexual Health and Responsibility in an ethical and dignified manner. The information shared is current and factual. The questions and needs of the students are addressed and parents are informed prior to the presentations of the curriculum covered.

I know that the information and concerns that this program presents clears up many misconceptions about Sexual Health in the minds of teens. Data is also presented to back up their facts.

I urge you to continue the excellent services of the Try Wait Program so they can benefit the students of the State of Hawaii.

Sincerely, Sheren La Mosts

Sheila Lei Woods

From:antonia alvarez [a.r.g.alvarez@gmail.com]Sent:Friday, January 30, 2009 3:59 PMTo:HLTtestimonySubject:Testimony in Support of HB 330Attachments:Testimony\_HB329.330\_jan30.09.doc

LATE TESTIMONY

Antonia R.G. Alvarez, MSW Director, Teen Suicide Prevention Mental Health America of Hawai`i and, Teen Advocate and Community Outreach Specialist, Domestic Violence Action Center

Friday, January 30, 2009, 8:30am House of Representatives Committee on Health

Representative Ryan Yamane and Members of the Committee,

I am a Social Worker and the Director of the Teen Suicide Prevention Project and the Coordinator of the Transition Age Youth Task Force at Mental Health America of Hawai'i. As many of you know, Hawai'i has one of the highest rates of teen suicide and attempted suicide in the nation with girls, Native Hawaiians and 9<sup>th</sup> graders at the highest risk of all. In collaboration with the Department of Health's Injury Prevention Program, I have spent the last 6 months traveling around O'ahu speaking with youth (between 13-25 yrs old) about their perceptions and experiences with teen suicide and depression.

I am here today because I am in strong support of HB 329 and HB 330. Through all of my research in Teen Suicide Prevention I have heard again and again (from the youth!) that unplanned pregnancy, pressure to have sex, and sexual trauma/victimization are major factors in the high levels of depression and attempted suicide among our teens. Many of the young people described to me their early experiences with sex and sexuality and their lack of accurate knowledge about what they were doing (i.e. having unprotected anal intercourse as a method of birth control with no knowledge of the high risk of transmitting/contracting HIV or other STIs). Several youth explained that they could never talk to their family members about sex and sexuality and that much of their depression and suicidality relates directly to that inability to communicate. What I am literally telling you is that some of these young people—our teenagers—would rather *die* than talk with adults honestly about sex. SOMETHING NEEDS TO CHANGE.

Abstinence-only-until-marriage education also risks the exclusion of the entire Lesbian, Gay, Bisexual, Transgender, Queer and Questioning population and the health risks and needs specific to non-heterosexual experimentation and partnering. The lack of information about healthy expressions of sex, gender, and sexuality significantly raise the risks of exposure to HIV, STIs, as well as numerous mental health issues including depression and low self-esteem. The LGBTQQ youth population is already the highest at risk of suicide and suicidality (among other things) in our state and it is vital that health and mental health care professionals are able to work to lower these risks.

If we continue to provide mis-education centering on abstinence, guilt, shame and the dangers of sex and sexuality these young people will continue to feel isolated and trapped by their choices. I do not believe that it is coincidental that Native Hawaiian 9<sup>th</sup> grade girls are at highest risk for suicidality in Hawai'i when I hear about the bullying, peer pressure and violence that many of them are experiencing as they transition into our high schools. It is vital that we provide medically accurate, comprehensive education about sex and sexuality to

the youth in our community so that we can divert some of the traumas and risks that lead to the *preventable* deaths of our children.

In my work as an Advocate and Community Outreach Specialist for teens dealing with Domestic Abuse and Dating Violence at the Domestic Violence Action Center, I have been reminded of how many choices these girls are <u>not allowed</u> to make. With the extremely high levels of sexual abuse, victimization, incest, and rape, choosing abstinence is not an option for many of the young women that I have talked to. If they do not have accurate information about the emotional and physical health risks that they are or have been exposed to --and if they do not have an educator, friend, mentor, or parent that will speak to them about these things without employing tactics of guilt and shame-- these women are very unlikely to seek out the support and care that they need. In other words, we need to do POST-vention as well, and in this case, the more information, the better.

The young women and men that I have had the privilege of working with, listening to, and learning from are growing up in a difficult time. They are exposed to many struggles and traumas at young ages that most people hope to never experience in their lifetimes. We need to take the silence and the secrecy out of sex and sexuality—it isn't helping. What our children do not know is *hurting them*. The more opportunities they have to learn about sexual health and safety—physical, emotional, and psychological, the more likely they are to practice healthy sexuality. We need to remove the barriers to comprehensive sexuality health education and reduce the risks for our children. We need them in our future—and it is time for us to show them that.

Thank you for receiving this testimony, Antonia Alvarez

Antonia R.G. Alvarez, MSW Director, Teen Suicide Prevention Mental Health America of Hawaii <u>antonia@mentalhealth-hi.org</u> Teen Advocate and Community Outreach Specialist Domestic Violence Action Center antoniaa@stoptheviolence.org