HB

325

HOUSE COMMITTEE REPORT

(11)
Date Referred: February 5, 1990 FURTHER REFERRALS:

Date of Committee Action: _____

The FINANCE Committee considered: HB 325

HOUSE BILL NO. 325 PUBLIC SCHOOL HEALTH & SAFETY EDUCATION

"An Act relating to public school health and personal safety education."

RECOMMENDATIONS:
[ ] be replaced with _____ [ ] the same title [ ] a new title

[ ] have attached amendment(s)

[✓] do pass

[ ] do not pass

[ ] no recommendation

[ ] individual recommendations

[ ] additional referral to the _____ Committee

ADOPTS: _____ letter of intent

ATTACHES NEW FISCAL NOTE(s): (Dept)

[✓] fiscal impact DOE 5240.6

[ ] zero fiscal note _____

[ ] zero with analysis _____

APPROVES PREVIOUS: (Date/Dept)

[ ] fiscal note(s) _____

[ ] zero fiscal note(s) _____

[ ] zero fn/analysis _____

SIGNING DO PASS:

Kopmer

Brown

Rieger

Ulmer

Hoffman

SIGNING: (Check approp. column)

	Do Not Pass	No Rec	Amend
Larson		✓	
Phillips		✓	
Barnes		✓	
Shultz		✓	

Hoffman

Chairman's Signature

Larson

STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: CS HB 325 (HESS)
PUBLISH DATE:

FISCAL NOTE

REQUEST:

Revision Date: 3/6/90
Title: Public School health and personal safety education
Sponsor: Boyer
Requestor: House Finance

Agency Affected: Education
BRU: Education Program Support
Components: Basic Education & Instructional Improvement

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES	58.0	60.0				
TRAVEL	6.6	11.7				
CONTRACTUAL	70.4	70.4				
SUPPLIES	.5	.5				
EQUIPMENT	5.1					
LAND & STRUCTURES						
GRANTS, CLAIMS	100.0	100.0				
MISCELLANEOUS						
TOTAL OPERATING	240.6	242.6				
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND	240.6	242.6				
FEDERAL FUNDS						
OTHER						
TOTAL						

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

ANALYSIS: (Attach a separate page if necessary)

SEE ATTACHED ANALYSIS

Prepared by: Mary Hakala
Division: Commissioner's Office
Phone: 465-2800
Date: 3/6/90

Approved by Commissioner: William G. Demmert
Agency: Education
Date: 3/6/90

Distribution (by preparer):
Legislative Finance
Legislative Sponsor
Requestor
Office of Management and Budget
Impacted Agency(ies)

Adopted

Narrative Outline - Fiscal Note for H.B.325
Revised 3/6/90

Personal Services	$58.0	Funding for PCN 1165, a currently unfunded PCN within the Division, to be reclassed from an Education Administrator I to an Education Specialist II. Note: Fiscal note assumes merit increase for position
Travel	$6.6	10 trips for technical assistance & coordination Year 2: additional travel for other educators to provide on-site assistance and regional exchange of ideas, successes and approaches (5.1)
Contractual	$70.4	phone/postage/photocopying costs (3.9) clerical support materials purchase to support training outlined below contracts: • Summer Institutes of 3 weeks for 20 practicing elementary teachers who would serve as building level "teacher leaders" - covers instructor fees and expenses, materials and partial scholarships for participants (17.0) • Local school inservices - training fees and expenses for experts to provide local assistance in comprehensive health and wellness teaching/learning strategies through Talent Bank (4.0) • Audioconferencing line fees (1.0) • Develop and produce materials for parents and community members to encourage participation in health education (10.0) Year 1 only • Develop and produce three Health Fair learning centers to encourage parents and other community members to participate in comprehensive school health education (20.0) Year 2 • Same as above plus additional Training Institutes at regional locations (20.0)
Commodities	.5	Supplies
Equipment	5.1	Year 1 only: One computer workstation (1.8); equipment and supplies for training programs, above.
Grants	100.0	Incentive mini-grants to local school sites for implementing comprehensive health promotion activities
Total =	$240.6	

Funding for comprehensive health education function in years three through six contingent upon legislative authorization and school district needs.

Offered: 2/5/90
Referred: Finance

6-1375E

711-Ed

Original sponsor(s): REP. BOYER, M.Davis, Ellis, Finkelstein, Goll, Jacko, Koponen, Brown, Ulmer

1 IN THE HOUSE BY THE HESS COMMITTEE

2 CS FOR HOUSE BILL NO. 325 (HESS)

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 SIXTEENTH LEGISLATURE - SECOND SESSION

5 A BILL

6 For an Act entitled: "An Act relating to public school health and personal
7 safety education."

8 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

9 * Section 1. AS 14.08.115 is amended to read:

10 Sec. 14.08.115. ADVISORY SCHOOL BOARDS AND COMMITTEES IN REGION-
11 AL EDUCATIONAL ATTENDANCE AREAS. A regional school board shall estab-
12 lish a health education curriculum advisory committee and may estab-
13 lish other advisory school boards or committees, and by regulation
14 shall prescribe their manner of selection and organization, and their
15 powers and duties.

16 * Sec. 2. AS 14.12.035 is amended to read:

17 Sec. 14.12.035. ADVISORY SCHOOL BOARDS AND COMMITTEES IN BOROUGH
18 SCHOOL DISTRICTS. A borough school district board shall establish a
19 health education curriculum advisory committee and may establish other
20 advisory school boards or committees, and by regulation shall pre-
21 scribe their manner of selection, organization, powers, and duties.

22 * Sec. 3. AS 14.30.360 is amended to read:

23 Sec. 14.30.360. CURRICULUM. (a) Each district in the state
24 public school system shall [BE ENCOURAGED TO] initiate and conduct a
25 program in comprehensive health education for kindergarten through
26 grade 12. The program must [SHOULD] include

27 (1) age appropriate instruction in physical health and
28 personal safety including

29 (A) alcohol and substance [DRUG] abuse and fetal

alcohol syndrome education;

(B) first aid, including cardiopulmonary resuscitation (CPR);

(C) human growth and development, including human sexuality, reproductive health, pregnancy prevention, prevention and control of diseases, including acquired immune deficiency syndrome and other sexually transmitted diseases;

(D) mental and emotional health, including suicide prevention;

(E) [,] early cancer prevention and detection, nutrition, dental health, family health, environmental health;

(F) [,] the identification and prevention of child abuse, child abduction, neglect, and sexual abuse, and domestic violence; [,] and

(G) appropriate use of health services;

(2) training, support groups, and pertinent literature designed to assist parents and other members of the community to participate in health and personal safety education;

(3) a district curriculum and curriculum materials developed in conjunction with the district health education curriculum advisory committee; and

(4) a method of notifying parents of students of the content of instructional materials used in the human growth and development program and of the parents' option to exempt their child from human growth and development instruction; a district shall use procedures to provide that students exempted from the program are not embarrassed by the exemption.

(b) The state board shall establish guidelines for a comprehensive health and personal safety education program. Personal safety

guidelines shall be developed in consultation with the Council on Domestic Violence and Sexual Assault. Upon request, the Department of Education, the Department of Health and Social Services, and the Council on Domestic Violence and Sexual Assault shall provide technical assistance to school districts in the development of personal safety curricula. A school health and personal safety education specialist position shall be established and funded in the department to coordinate the program statewide. Adequate funds to enable curriculum and resource development, adequate consultation to school districts, and a program of [TEACHER] training and periodic staff development for administrators and teachers in health and personal safety education shall be provided.

+ Sec. 4. TRANSITION. Each district shall begin development of the comprehensive health education curriculum required by this Act by July 1, 1990, and shall have in place a program of comprehensive health education required by this Act by August 1, 1991.

CS HB325 (HESS)
Sectional Analysis

Section 1.

Requires that each regional school board shall establish a health education curriculum advisory committee.

Section 2.

Requires that the borough school district shall establish a health education curriculum advisory committee.

Section 3.

Outlines comprehensive health education program components: Specifies curriculum subject areas to be included in instruction (A-G); requires training, support groups, and pertinent literature designed to assist parents and community members to participate in health and personal safety education; requires curriculum be developed in conjunction with local advisory committees; requires a method of notifying parents of the content of instructional materials used in the human growth and development program and the option to exempt their child from this portion of the instruction.

Section 4.

Provides dates for development and implementation of the comprehensive health education curriculum. Curriculum development shall commence by July 1, 1990 and the program shall be in place by August 1, 1990.

Alaska State Legislature

REPRESENTATIVE
MARK BOYER

VICE-CHAIRMAN, HOUSE
HEALTH, EDUCATION AND
SOCIAL SERVICES COMMITTEE

MEMBER, HOUSE LABOR AND
COMMERCE COMMITTEE

CHAIR, CHILDREN'S CAUCUS

FAIRBANKS

1098 LAKEVIEW TERRACE
FAIRBANKS, ALASKA 99701
(907) 456-6473

JUNEAU

P.O. BOX V
STATE CAPITOL
JUNEAU, ALASKA 99811
(907) 465-3466

House of Representatives

M E M O R A N D U M

February 20, 1990

TO: Representative Lyman Hoffman, Co-Chairman
Representative Ron Larson, Co-Chairman
House Finance Committee

FROM: Representative Mark Boyer

SUBJECT: CSHB 325 (HESS) "An Act relating to public school health and personal safety education."

CSHB 325 (HESS), the Healthy Student Bill, requires each school district to initiate and conduct a program in comprehensive health and personal safety education for kindergarten through grade 12. Under the HESS Committee Substitute, the curriculum shall include age appropriate instruction in the the general areas of alcohol and substance abuse and fetal alcohol syndrome; first aide, including CPR; human growth and development to include specifically human sexuality, reproductive health, pregnancy prevention; prevention and control of diseases to include AIDS and other sexually transmitted diseases; mental and emotional health, including suicide prevention; early cancer prevention and detection, nutrition, dental health, family health, environmental health; the identification and prevention of child abuse, child abduction, neglect, and sexual abuse, and domestic violence and appropriate use of health services.

How do we prevent STD among teenagers, unwanted pregnancies, suicide? One step is to educate and expose our young people to the specific health risks and prevention options available to them. CSHB 325 (HESS) is a step toward insuring that our young people are receiving information that will help them make the right decisions when dealing with emotional crisis or peer pressure.

The HESS Committee Substitute is committed to community ownership of the curriculum. Local advisory committees will be established to work with the school boards in the planning and development of curriculum materials. Clearly, without family and community ownership and commitment, the curriculum

may not be as useful in dealing with a particular district's demographics. The fiscal note reflects our commitment to community involvement by providing for $100,000 in grants to districts for consensus building in developing and implementing comprehensive health promotion activities.

CSHB 325 (HESS) has the support of the Department of Education and the State School Board and the support of the following groups and organizations:

Church Women United in Alaska
Resource Center for Parents and Children
Department of Public Safety
Alaska Council of School Administrators
Alaska Health Education Consortium
Medical Advisory Committee of the Anchorage School District
Action for Alaska's Children
Access Alaska
Arctic Alliance for People
American Lung Association of Alaska
North and Northwest Alaska Mayors' Conference
National Education Association - Alaska
Bristol Bay Area Health Corporation
Alaska Youth and Parent Foundation
American Association of University Women
A.W.A.R.E., Inc.
Planned Parenthood of Alaska
Alaska Native Health Board
Fairbanks Native Association, Inc.
Volunteers of America
Central Council, Tlingit and Haida Indian Tribes of Alaska
Sitka Teen Resource Center
Bering Sea Women's Group

file HB 325

FIRST SESSION OF THE TENTH ANNUAL
NORTH AND NORTHWEST ALASKA MAYORS' CONFERENCE
NOORVIK, ALASKA
October 31 - November 3, 1989
"ECONOMIC DEVELOPMENT IN ACTION"

RESOLUTION NO. 90-27

A RESOLUTION ADDRESSING ALCOHOL AND DRUG ABUSE.

WHEREAS, Alcohol and drug abuse problems exist in the State;

WHEREAS, State budget has declined due to reduced oil revenues;

WHEREAS, Drug and alcohol problems threaten the traditional family units in rural Alaska;

WHEREAS, Illegal drugs and alcohol continue to be brought in on commercial air carriers;

WHEREAS, There is a lack of funds for educating people about the problems;

WHEREAS, There is a lack of regional treatment centers;

WHEREAS, There are a lack of recreational facilities to provide an alternative to using drugs and alcohol;

WHEREAS, There is a lack of counselors who are culturally sensitive to the native culture;

WHEREAS, There is a lack of utilization of traditional ways of healing as part of the treatment of drug and alcohol abuse;

NOW THEREFORE BE IT RESOLVED BY THE NORTH AND NORTHWEST ALASKA MAYORS' CONFERENCE THAT: WE REQUEST INCREASED FUNDING FOR VILLAGE PROGRAMS TO DEVELOP AND TRAIN VILLAGE COUNSELORS, AND INSTITUTE VILLAGE PROGRAMS BEGINNING IN THE ELEMENTARY SCHOOLS;

BE IT FURTHER RESOLVED BY THE NORTH AND NORTHWEST ALASKA MAYORS' CONFERENCE THAT: REGIONAL TREATMENT CENTERS BE BUILT AND ADEQUATELY STAFFED AND THAT VILLAGE RECREATION FACILITIES BE CONSTRUCTED TO PROVIDE AN ALTERNATIVE TO DRUG AND ALCOHOL USE;

BE IT FURTHER RESOLVED BY THE NORTH AND NORTHWEST ALASKA MAYOR'S CONFERENCE THAT: TREATMENT PROGRAMS INCLUDE TRADITIONAL HEALING AS AN INTEGRAL PART OF A HOLISTIC APPROACH TO TREATMENT;

BE IT FURTHER RESOLVED BY THE NORTH AND NORTHWEST ALASKA MAYOR'S CONFERENCE THAT: VILLAGES RECEIVING MONEY FOR PROGRAMS AND FACILITIES BE REQUIRED TO HAVE WORKSHOPS ON PREVENTING ABUSE AND THE IMPORTANCE OF THE FAMILY STUCTURE.

PASSED AND APPROVED BY THE FIRST SESSION OF THE TENTH ANNUAL NORTH AND NORTHWEST ALASKA MAYORS' CONFERENCE THIS 3rd DAY OF NOVEMBER, 1989.

Albert A. Washington — Robert Foote

ALBERT WASHINGTON
PRESIDENT

ROBERT FOOTE
SECRETARY

INTRODUCED BY: KOTZEBUE

VOTE: YES: UNANIMOUS

SECONDED BY: SELAWIK

NO:

DIRECTED TO:
Governor Steve Cowper
Alaska State Legislature
Alaska Dept. of Health and Social Services
Regional Non-profit Associations (Statewide)
Regional Health Corporations (Statewide)

BILL NO: HB 325 DATE: January 22, 1990

TITLE: Public School Health and Safety Education CONTACT: Barbara Miklos [illegible]

DEPARTMENT OF PUBLIC SAFETY

The Council on Domestic Violence and Sexual Assault supports HB 325 "An Act Relating to public school health and personal safety education". This bill requires school districts to initiate and conduct a program in comprehensive health education for kindergarten through grade 12. Present law "encourages" such a program. Included in the required curriculum is sexual abuse, domestic violence and parenting instruction.

At least 25% of the women in Alaska have been victims of domestic violence. More than a third of those women reported that their children were direct victims of violence, and all children raised in violent homes suffer emotional trauma. Nationally, at least 1/4 of girls and 1/10 of boys will be victims of child sexual abuse before they are 16. Children who are raised in violent families or other dysfunctional families often have poor role models for being parents. They should be taught how to parent so their children are protected from violence. In order to be able to protect themselves, know where to get help and/or prevent themselves from being caught up in domestic violence; children need information about these subjects.

Many schools are providing instruction in domestic violence, sexual assault, child abuse and parenting. However, many are not. In order to stop the cycles of violence, we must reach children in all schools. Therefore, the Council supports making health education and personal safety curriculum mandatory.

Arthur English
Commissioner

HB 325

I work with teens in classrooms as a guest speaker on issues of sexuality and teen relationships.

It is my experience that teens respond thoughtfully and enthusiastically to a speaker who is comfortable presenting accurate, comprehensive information and is knowledgeable in the area of teen psychology.

During my presentation, teens surprise their regular instructors by remaining quiet and asking questions of the presenter. They feel free to explore their belief systems because of the frankness of the presenter when discussing real life situations. Repeatedly, teens are calling for accurate information about contraceptives, building values, abortions, homosexuality and teen pregnancy. They say "get real" to school districts who seek to limit information discussed in the classroom. They say they would never reveal a pregnancy to a school nurse who was obliged to report to their parent, thereby missing an important link in services. Most cases, school nurses are able to help a child talk with parents, but only if she comes to the nurse's office in the first place.

Parents try to satisfy their children's curiosity about the world, but when these children become adolescents their curiosity is suddenly a threat. When they want data with which to make decision - we don't give it to them. Instead we allow them to be barraged with social messages extolling the idea that sex sells. If they wanted to drive a car, would we hide driving manuals? Sure some teens would stay home, but most would climb behind the wheel anyway, even without the knowledge.

In my experience, teens make the best decisions when they know the truth and see it demonstrated by trusted adults. They need facts. The school is the standard depository of the truth, outside of the home and church. Most children don't get information about sexuality at home, and perhaps an edited version at church.

Kids need a teacher who is expert and comfortable with the topic. The instructor should be a trained health or sex ed teacher in a paid position.

Kids need to feel free to speak about current issues such as homosexuality, extra marital sex, values, contraceptives, and abortion. The teacher can offer abstinence as an ideal value, but also needs to explore with students their thinking on other values.

This information, like most of the input in a child's life, needs to be provided early - beginning in grade school in a developmentally appropriate form.

Males and females need to be together to discuss much of the material so that they can receive adequate feedback and explore gender differences.

Parents need training in talking to their children at home about sexuality, as most adults aren't accepting of or comfortable with their own sexuality and have difficulty speaking about it.

Better a healthy prevalence of sexual messages than an unhealthy one!

Kelli Mahoney
925 Lone Cub WAY
Wasilla AK

MARY LOU KNICKERBOCKER
9456 La Perouse
Juneau, AK 99801

Finance Committee
Alaska House of Representatives

Friends:

I am speaking for the Executive Board of Church Women United in Alaska. in support of HB 325.

Church Women United is a national, ecumenical group of Protestant, Catholic and Orthodox Christian women with a great concern for the increasing impoverishment of women and children.

Since we have become convinced that teenage pregnancies and abuse of alcohol and drugs play very large roles in the cycle of increasing poverty, we support the educational requirements of HB 325 as an important step in the right direction.

Mary Lou Knickerbocker

Mary Lou Knickerbocker
Church Women United in Alaska

STATE OF ALASKA

STEVE COWPER, GOVERNOR

DEPARTMENT OF EDUCATION

OFFICE OF THE COMMISSIONER

GOLDBELT PLACE
801 WEST 10TH STREET
P.O. BOX F
JUNEAU, ALASKA 99811-0500

Position Paper on HB 325

Second Session
16th Alaska Legislature

The State Board of Education supports the concept of HB 325 which would require school districts to adopt a comprehensive K-12 health education curriculum.

Steve Hole

2-1-90

for William G. Demmert
Commissioner

Date

05-E1LH

...ect, Suite 2, Anchorage, Alaska 99501 (907) 276-5864
Deborah Williams, Executive Director

Cell bill file
HB325

AMERICAN LUNG ASSOCIATION of ALASKA

Dedicated to the prevention and control of lung disease

February 1, 1990

Representative Mark Boyer
P.O. Box V
Juneau, Alaska 99811

Dear Representative Boyer,

The American Lung Association of Alaska supports comprehensive health education for Alaska and specifically supports House Bill 325.

Since 1904, the American Lung Association, the nation's oldest voluntary health agency, has been a respected leader in this country's public health movement. The organization was founded to prevent tuberculosis and was a leader in conquering this dreaded disease. Today our mission is broader. The American Lung Associaton is dedicated to the conquest of lung disease (such as emphysema, lung cancer and asthma) and the promotion of lung health. Because smoking is the leading cause of lung disease in our country, we have taken to heart former Surgeon General C. Everett Koop's challenge to reach a smoke free society by the year 2000.

The American Lung Association has long recognized that behavioral decisions are not made in a vacuum and that preventive programs must take into account the circumstances of an individual's life.

The tobacco industry bombards our young people with a two billion dollar advertising campaign every year. The models depict an elegant life style, professional and social success, or the zest of the great outdoors. The message ensnares our young people who begin regular daily smoking in eighth through tenth grades.

At the same time we know that teen-agers who smoke cigarettes are more likely to drink and smoke marijuana. For adolescent girls especially, cigarette smoking is a common "gateway" to illicit drug use.

Pressure to conform and peer influence are very strong in early adolescence. If smoking or drug use is considered a behavior which has been adopted by a majority of the group, then the importance of conformity can be a major factor in experimentation. Unfortunately, teen-agers tend to over estimate the proportion of their peers and role models who are smokers.

The American Lung Association believes that an integrated, comprehensive approach to health education will have the greatest effect not only on knowledge, but also in attitudes and most importantly, in the actual practices of the individual as a child, young person and adult.

Statewide, Alaska reports some of the highest tobacco user rates in the nation. The majority of smokers begin their addiction by age 16. Statewide, Alaska reports some of the highest incidences of low birth weights among pregnant women from tobacco use and alcohol abuse. Alaska also reports some of the earliest tobacco usage among teens in the nation. There is a direct correlation between academic performance and lower smoking rates. Of students reporting an average grade of A in high school, one in 14 (7 percent) is a daily smoker, while of those averaging a grade of D, nearly 50 percent are daily smokers.

Lung Cancer is the leading cause of death in Alaska. In 1985, 14% of all deaths in Alaska were cigarette related according to the Epidemiology Bulletin No. 13, June 17, 1988. Division of Public Health, Department of Health and Social Services.

According to a 1985 Indian Health Service Survey (Smokeless Tobacco Use in Rural Alaska Morbidity and Mortality, Weekly Report, March 10, 1987. Volume 36, Number 10). 43% of girls and 45% of boys (children 5-18) in rural Alaska reported having tried smokeless tobacco. Average age for first time use in Alaska was 9 years old. The national average age for first time use is substantially higher.

These are but a few tragic health statutes that distingush Alaska from other states. A study from the "Recording and Epidemiology of Studies in Alaska, 1983-1984,: Division of Public Health, documents the overwhelming comparative suicide rates between Alaskans and the U.S. total. For ages 15-19, the comparative suicide rates of native vs. non-natives vs. United States total per 100,000, 1983-1984 were as follows: 105 Native Male/ 32 white Alaskan Males/ 15 Native Females/ 8 white Alaskan Females/ and 5.7 United States total.

Alaska also has the leading rates of accidental gun deaths among children 14 and under. Alaska led the nation between 1980-1985 with 2.1 accidental gun deaths per 100,000 children per year over 2nd place Arkansas with 1.5 per year per 100,000 children.

Even more devasting is the danger of Fetal Alcohol Syndrome in Alaska. According to the World Health Organization, Fetal Alcohol Syndrome per 100,000 birth rates were on the average as follows: Seattle 170/ New York State 170/ Navajo population 200/ and 420 Alaskan Natives.

Such statistics boggle the mind and stand in sharp contrast to our perception of what it means for a child to have his/her fair chance at life. Children are products of their environment. Each day they make choices which increase or reduce their chances of living free of addiction, depression, serious illness and/or chronic crippling conditions. Successful prevention of health problems related to lifestyle must include providing our children with the information and skills they need to form good healthy behaviors and attitudes.

At present, Health is not a required subject in grades K-12 in Alaskan schools. Present programs are piece-meal, and the teachers have little or no training. There are many school health education curriculas "floating around." However, when looking for comprehensive school health education curricula, the field narrows considerably. Broadly speaking, the term comprehensive school health education means health education in a school setting that is planned and carried out with the purpose of maintaining, reinforcing, or enhancing the health, health-related skills, and health attitudes and practices of children that are conducive to their good health.

Our young people must be able to make smart choices early in life if they are to lead healthy and productive lives later. Studies have shown that comprehensive health education early in life does impact on the behavior of young people and adults later in life. The American Lung Association has been actively implementing comprehensive health education in over 40 states. The American Lung Association of Alaska is active in supporting comprehensive health curriculum, but the state of Alaska must be more aggressive in mandating comprehensive health and providing the funds for effective implementation.

Sincerely yours,

Rebecca Rogers

Rebecca Rogers
Program Coordinator

Wan/bill file

Bering Sea Women's Group

MEMORANDUM

TO: Representative Mark Boyer
P.O. Box V, Room 114
Juneau, Alaska 99811

FM: Sonja Greene,
Executive Director
Bering Sea Women's Group

This memorandum is to inform you of Bering Sea Women's Group support for House Bill 325 - - - " An Act relating to Public Schools and Personal Safety Education.

P.O. Box 1596 / Nome, Alaska 99762 / (907) 443-5444 / (907) 443-5491

Nan/bill file-

SITKA TEEN RESOURCE CENTER

"PREVENTION THROUGH EDUCATION"
P.O. BOX 1034 SITKA, ALASKA 99835
(907) 747-3500

October 5, 1989

Representative Mark Boyer
Alaska State Legislature
House of Representatives
1096 Lakeview Terrace
Fairbanks, AK 99701

Dear Represenative Boyer:

This letter is to express my fullest support for the passage of House Bill 325 - "An Act relating to public school health and personal safety education."

As the director of a youth drug and alcohol abuse prevention program, I work with youth who are abusing drugs and alcohol, kids who start smoking at age eight, girls who are pregnant at age 14, and youth who are the victims of substance abuse at home. At a recent teen parenting group at the Teen Center, six out the six girls (100%) reported having had at least one sexually transmitted disease.

I am convinced that one of the ways to deal with these growing problems is education at school, at home, and in the workplace. Like you, I believe that accurate information helps people make intelligent decisions.

Sincerely,

Kathy Starostka

Kathy Starostka
Executive Director

Nary/Wle HB 325

CENTRAL COUNCIL
tlingit and haida indian tribes of alaska
ANDREW P. HOPE BUILDING
320 West Willoughby Avenue • Suite 300
Juneau, Alaska 99801-9983

October 17, 1989

Representative Mark Boyer
House of Representatives
P.O. Box V
STATE CAPITOL
Juneau, Alaska 99811

House Bill 325

Dear Representative Boyer:

I believe that one of the great tragedies of today is that we fail to teach our children some of the basic information they need to live quality lives.

I support your efforts to require schools to teach our children about parenting, pregnancy, all types of diseases, suicide prevention and human sexuality.

As a retired 20 year Alaska State Trooper, parent, step-parent, current employee of an Alaska Native non-profit organization, and current member of the Juneau Sexual Assault Task Force I know our children **need** this type of information. They are having sex, taking drugs, becoming pregnant, committing suicide and raising babies without benefit of any real knowledge or understanding of risks involved.

To deny that children are already doing these things is to deny reality. Statistical evidence is clear. Alaska teens have more babies per capita than the U.S. average.[1] 12 - 17 year old Alaskans drink more alcohol, smoke more marijuana, use more tobacco, snort more cocaine and shoot more heroin than their counterparts in other states.[2] To deny these children knowledge that may help them avoid dangerous behavior is criminal.

Thank you for your efforts and your consideration of this letter.

Sincerely,

George B. Cole
VPSO Program Manager

---

1. Three a Day: Children Having Children in Alaska, August 1989, Senate Advisory Council, Alaska State Legislature.

2. Drug-taking Behavior Among Alaskan Youth - 1988: A Follow-up Study, November 1988, Bernard Segal, Ph.d..

Telephone 907/586-1432 FAX 907/586-8970

Net/Coll file

VOLUNTEERS OF AMERICA
OF ALASKA
Administration & ASSIST • 101 E. 9th Suite 12B • Anchorage, AK 99501 • (907) 279-9634
ARCH • P.O. Box 770209 • Eagle River, AK 99577 • (907) 694-3336

October 16, 1989

Representative Mark Boyer
P.O. Box V
State Capital
Juneau, AK 99811

Dear Representative Boyer,

This letter is written in support of HB 325 which would provide age appropriate health curriculum throughout Alaska's public schools.

As service providers for children ages 11 to 18, we definitely see the need for such education.

We strongly urge all of those involved to support such important legislation.

Sincerely,

Jann Pittman
Community Outreach Manager

Sandra Hobbs
Executive Director

Nan|b.l p.l HB 325

FAIRBANKS NATIVE ASSOCIATION, INC.
310½ First Avenue
Fairbanks, Alaska 99701
Phone: (907) 452-1648 / 456-5151

October 9, 1989

The Honorable Johnny Ellis
Chairman, House Health, Education and
Social Services Committee
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Mr. Ellis:

This letter is in support of HB 325, "An Act relating to public school health and personal safety education".

Knowing how to establish and maintain a healthy lifestyle is of primary importance and is the first step in prevention. Ignorance of health issues such as Aids, substance abuse, reproductive health, and suicide prevention will only serve to perpetuate these rather than help young people make intelligent choices concerning their health and well-being.

At the Fairbanks Native Association we see many people who were not given the necessary tools and information early enough in life to enable them to make the choices which lead to a healthy lifestyle. The unfortunate results affect the clients themselves, they affect their families, their friends, and eventually the whole community. The costs in terms of lost human potential and the strain on the economy are immeasurable.

By focusing on prevention measures as early as possible, we will help our youth avoid many future hardships and problems. This can only have positive outcomes in terms of a generation better equipped to face the future, and a generation with the knowledge to develop a healthier lifestyle and thereby a healthier community. I hope you will work for the approval of HB 325.

Sincerely,

Samuel S. Demientieff
Executive Director

Nod/bill file-

Alaska Native Health Board

1345 RUDAKOF CIRCLE SUITE 206 ANCHORAGE, ALASKA 99508 PHONE 907-337-1028

October 12, 1989

Representative Mark Boyer
Alaska State Legislature
Post Office Box V (MS 3100)
Juneau, Alaska 99811

Dear Representative Boyer:

The Alaska Native Health Board would like to express support for House Bill 325, entitled "an act relating to public school health and personal safety education."

This bill has been needed for a long time and we encourage your efforts on behalf of the children of Alaska.

Thank you for the opportunity to comment on this proposed legislation.

Sincerely,

Dennis P. DeGross
Executive Director

DPD/dlr

AHEC
Alaska Health
Education Consortium

P.O. Box 100563, Anchorage, Alaska 99510

May 30, 1989

Representative Mark Boyer
Alaska State Legislature
P.O. Box V
Juneau, Alaska 99811

Dear Representative Boyer:

On behalf of the members of the Alaska Health Education Consortium, I would like to express strong appreciation for your interest in school health education and for your efforts in making this a required area of instruction.

Several members of our Legislative Committee have been involved with recent health education legislation and will be in contact with your office soon. I hope that the following weeks will afford an opportunity for them to work with you and your staff as HB325 is addressed. We are eager to facilitate legislation that promotes comprehensive health education in schools.

The Alaska Health Education Consortium was formed in 1975 and includes statewide representation and membership of individuals trained in the topics and techniques relevant to contemporary issues of health risk and lifestyle modification for people of all ages. Additional information about our organization is enclosed.

In 1984 our organization passed a resolution related to comprehensive school health education, which remains relevant today. I have enclosed a copy for your reference.

Again, I look forward to working with you toward our mutual goal of enhancing the health of youths through health education in schools. Thank you for your attention and concern.

Sincerely,

Augusta Reimer

Augusta Reimer, President
Alaska Health Education Consortium

333-7389

Enc: AHEC Pamphlet
AHEC Resolution 84-2

KNOWLEDGEABLE CHOICES FOR OPTIMUM HEALTH

in the school district. Invariably this results in a much stronger program which enjoys much greater community acceptance. We would like to see a statement in the bill emphasizing the importance of this.

3. It is important that parents have the opportunity to decide whether their children participate in the program. Other community institutions are also concerned with providing this knowledge to young people, and the family should have the right to determine which of these institutions to utilize. Most parents want such a program to be offered in the public schools and approve of their children's participation in it. However, the rights of the minority who do not want their children involved should be respected.

We hope you find the above suggestions constructive. If there is anything more we can do to help win enactment of this bill, please call on us. Congratulations on an excellent bill!

Sincerely,

G. Patrick Spartz
Acting Executive Director

cc: Co-sponsors

planned parenthood of alaska

☐Administration - 1008 W. Northern Lights, Anchorage, Alaska 99503 (907) 563-2229
☐Statewide Mobile Clinic - 1008 W. Northern Lights, Anchorage, Alaska 99503 (907) 563-2229
☐Anchorage Clinic - 1008 W. Northern Lights, Anchorage, Alaska 99503 (907) 563-2229
☐Mat-Su Valley Clinic - Wasilla Business Park, 201 E. Swanson, Suite 13, Wasilla, Alaska 99687 (907) 376-6535
☐Sitka Clinic - 201 Lincoln Street, P.O. Box 515, Sitka, Alaska 99835 (907) 747-3883
☐Peninsula Service - P.O. Box 3666, Soldotna, Alaska 99669 (907) 262-2622

October 4, 1989

Rep. Mark Boyer
1098 Lakeview Terrace
Fairbanks, Alaska 99701

Dear Rep. Boyer:

Thank you for your letter of September 28 regarding HB 325. We are very happy that you introduced this bill, and you can be assured of our support for it.

Planned Parenthood of Alaska has always supported sexuality education programs which reach young people of all ages. We believe that this can best be accomplished as part of a comprehensive "physical health and personal safety" program such as the one your bill calls for. We're pleased that the bill recognizes the importance of adequate training for those involved in the program, and for the educational aids to be developed for parents and others in the community. We appreciate the position you and the bill's co-sponsors have taken that knowledge is empowerment, and that all subject areas related to human sexuality and reproductive health need to be addressed.

We do have three suggestions which we believe would strengthen your bill:

1. In establishing guidelines for the program, the Board of Education should draw upon the experience and expertise of all agencies and organizations who have been involved in any aspect of the program. Planned Parenthood has advocated many years for sexuality education and reproductive health services, and we know our resources would be of immense value to the Board in the development of the guidelines as well as in their implementation. A provision in the bill providing for the involvement of all agencies with expertise to contribute would be desirable.

2. In establishing programs at the local level, it is essential that there be maximum community involvement. Every segment of the community should have an opportunity to be heard in determining the kind of program which should be implemented

Domestic violence and sexual abuse are perpetrators in themselves of teaching general helplessness behavior, juvenile delinquency, alcohol/drug abuse, suicide and homicide.

Representative Ellis thank-you for your time and consideration. If we can be of any assistance in regards to this issue, please don't hesitate to contact us at (907) 586-6623.

Respectfully,

Tina M. Martin

Tina M. Martin
Rural Outreach Coordinator

cc: Senator Duncan
Representative Boyer
Representative Hudson
Representative Ulmer

Children from violent homes have higher risks of alcohol/drug abuse and juvenile delinquency.

Thirty-four years ago, Weinberg (1955), estimated that there were one to two cases of incest per million persons per year in the English speaking countries. This would mean 200 to 400 cases a year in the U.S. As recent statistics have shown, this is a gross under estimation of the problem prevails. The American Humane Association estimates 200,000 to 300,000 cases of female child molestation in the United States per year, with at least 5000 cases of father-daughter incest. (Summit & Kryso, 1978). From the U.S. Dept. of Justice's National Symposium, October, 1984 (unpublished report, 1984) reveals that in 1984, 1 in 3 females and 1 in 4 males between the ages of 3 to 18 years had been sexually abused. They report that 36 percent of these were victims of incest.

It is estimated that only 1 in 6 (Finkelhor, 1979) to 1 in 10 (U.S. Bureau of Statistics, 1984) cases ever get reported.

When incest occurs, the child is not likely to report the violation because to begin with children have a hard time mentally and emotional even understanding and comprehending a violation of their trust and being has occured often with-in the "home". Devastation accompanied with numbness are coping skills which automatically kick in. (Martin, 1989). Other contributing factors include: family is at stake, she/he is inclined to be disbelieved and she/he fears embarassment and other repercussions (Butler, 1978; Vander, Mey & Neff, 1982; Finkelhor, 1978; Renoize, 1978; Safafino, 1979).

Father-child incest in Juneau is 4.6 times the national average, while child abuse is general is six times the national average.

The class room is the logical and appropriate institution to provide students with knowledge. Knowledge provides education, and in turn education allows OPTIONS. Options are what we strive to offer. Options are the American way. A healthy life style free from domestic violence and sexual abuse can not be picked if the option does not even exist in one's mind. Let us not forget for children to live healthy life styles free from domestic violence and sexual abuse, we must guarentee that they will be offered options.

AWARE

Aiding Women from Abuse and Rape Emergencies

"Serving Juneau and Nine Southeastern Communities"

(907) 586-6623 (business) (907) 586-1090 (crisis)

P.O. Box 020809
Juneau, Alaska 99802-0809

October 5, 1989

Representative John Ellis
Chair, HESS Committee
3111 "C" Street, Suite 455
Anchorage, Alaska 99503

Honorable John Ellis:

On behalf of AWARE, Inc. in Juneau I would like to take a few moments of your busy schedule. AWARE, Inc. is in full support of HB 335-- "An Act relating to public schools health and personal safety education."

I will offer the following statistical information as justification.

In homes where domestic violence occurs, children are at high risk of suffering physical abuse themselves. Regardless of whether children are physically abused, the emotional effects of witnessing domestic violence are very similar to the psychological trauma associated with being a victim of child abuse. Each year 3.3 million children witness domestic violence.

It has been stated every 18 seconds a woman is beaten in the United States of America in her HOME.

An estimated 3 to 4 million American women are battered each year by their husbands or partners.

Each year more than one million woman seek medical assistance for injuries caused by battering.

Violence will occur at least once in two-thirds of all marriages.

An in-depth of all one-on-one murder and non-negligent manslaughter cases from 1980-84 found that more than oen -half (52%) of female victms were killed by male partners.

Children in homes domestic violence occurs are physically abused or seriously neglected at a rate 1500% higher than the national average in the general population.

Lenore Walker's 1984 study found that mothers were 8 times more likely to hurt their children when they were being battered than when they were safe from violence.

1200 W. Dimond #1477
Anchorage, AK 99515

Maybill file

October 9, 1989

Representative Mark Boyer
P.O. Box V
Juneau, AK 99811

Re: House Bill 325

Dear Mr. Boyer;

It's about time! I was very pleased to receive your letter and the copy of House Bill 325, "An Act relating to public school health and personal safety education".

As a parent of four children and experiences working among children and adults who have conflicting attitudes and education on substance abuse, human sexuality and reproductive health, pregnancy prevention, prevention of AIDS and other sexually transmitted diseases, parenting, and suicide prevention, I have noticed a need in our schools for pertinant and updated information for our students and teachers.

In the past, my children and their friends have asked me to teach sex education in the schools because they have people who are supposed to teach the class who have been substitutes, secretaries and the school nurse. These people are uncomfortable teaching the classes and are more uncomfortable with the student's questions. Having people teach these subjects who are comfortable with their own sexuality and being able to answer any questions the students may have is a must.

I do hope this bill gets passed and if I can be of any assistance, please contact me.

Sincerely,

Jacquelyn Y. Canoose

Jacquelyn Y. Canoose

ADVOCATES FOR COMPREHENSIVE HEALTH EDUCATION LEGISLATION

American Association of University Women S.C. Division

American Association of Sex Educators, Counselors and Therapists

American Heart Asso., S.C. Affiliate

American Lung Association

Baptist Educational & Missionary Convention of S.C.

Charleston YWCA

Clemson Extension Service

Columbia Medical Society

Community Care - Columbia

Council on Child Abuse and Neglect

Episcopal Diocese of Upper S.C.

Family Service Center

Greenville Council on Teenage Pregnancy

Greenville YWCA

League of Women Voters of S.C.

Lutheran Church in America, S.C. Synod

Lutheran Church Women of S.C.

Lutheran Social Services of Central S.C.

Lutheran Theological Southern Seminary

March of Dimes, S.C. Chapter

Mental Health Asso. of Aiken Co.

Mental Health Asso. of S.C.

National Association of Social Workers

National Council of Negro Women

Palmetto State Teachers Assoc.

Planned Parenthood of Central S.C.

S.C. Academy of Pediatrics

S.C. Academy of Family Physicians

S.C. Asso. for Health Education

S.C. Asso. for Health, Physical Education, Recreation and Dance

S.C. Asso. of School Administrators

S.C. Baptist Convention

S.C. Business & Professional Women's Clubs

S.C. Christian Action Council

S.C. Commission on Women

S.C. Congress of Parents and Teachers

S.C. Council on Family Relations

S.C. Dietetic Asso.

S.C. Dept. of Education

S.C. Dept. of Health & Env. Control

S.C. Dept. of Youth Services

S.C. Developmental Disabilities Council

S.C. Education Association

S.C. Healthy Mothers/Healthy Babies Coalition

S.C. Home Economics Asso.

S.C. Medical Association

S.C. Medical Asso. Auxiliary

S.C. National Organization for Women

S.C. Nurses Association

S.C. Perinatal Association

S.C. School Boards Association

S.C. State Board of Education

State Council, Maternal, Infant, and Child Health

Teen Pregnancy Reduction Network

United Methodist Church, S.C. Conference

YWCA of the Midlands

YWCA of Sumter

2/25/88

Chris/bill file—

Alaska Youth & Parent Foundation

November 17, 1989

Representative Mark Boyer
Alaska State Legislature
P.O. Box V (MS 3100)
Juneau, Alaska 99811

Dear Representative Boyer:

The Alaska Youth and Parent Foundation is in favor of and supports House Bill No. 325, "An Act relating to public school health and personal safety education."

The AYPF mission is to promote the well-being of youth at risk and their families so that they may live healthy and productive lives. It is our opinion that "well-being" includes being knowledgeable about human sexuality in order to make well-informed choices.

This piece of legislation includes training, groups, literature and staff development. It will take a large fiscal note to accomplish the intent of this legislation. If HB 325 passes with inadequate funding, it will result in a poor, and possibly harmful, curriculum.

We support the legislation and the money needed to plan and implement a quality program.

Sincerely,

Sheila A. Gaddis
Executive Director

cc: Kay Lahdenpara
Municipality of Anchorage

Sheila A. Gaddis
Executive Director

Family Resource Center, 3745 Community Park Loop, Suite 202
Anchorage, AK 99508 Phone 274-6541

Christine / bill file
HB 32

BRISTOL BAY AREA HEALTH CORPORATION

P.O. BOX 130 • DILLINGHAM, ALASKA 99576
(907) 842-5201 or (907) 842-5202

November 30, 1989

Representative Mark Boyer
Vice-Chairman
House HESS Committee
1098 Lakeview Terrace
Fairbanks, Alaska 99701

Dear Representative Boyer,

Please count our organization as a supporter for House Bill 325- "An Act relating to public school health and personal safety education".

We represent 32 villages in the Bristol Bay Area of Alaska. There are also five (5) School Districts that serve our villages and we have been on record requesting that they teach a comprehensive health curriculum. We are a resource and on request would be happy to provide technical assistance and thank you for sponsoring such legislation, even if it is an area the School Boards feel is their perogative or choice.

Sincerely,

Robert J. Clark,
Chief Executive Officer

cc: Board of Directors (see attached)
Representative Jacko
Senator Zharoff

Respectfully submitted,

Bob Manners
Executive Director

Don Oberg
President

cc: Rep. Mark Boyer

NEA-ALASKA

AFFILIATED WITH THE NATIONAL EDUCATION ASSOCIATION

ANCHORAGE REGIONAL OFFICE
1411 W. 33RD AVENUE
ANCHORAGE, ALASKA 99503
(907) 274-0536

JUNEAU OFFICE
105 MUNICIPAL WAY, SUITE 302
JUNEAU, ALASKA 99801
(907) 586-3090

FAIRBANKS REGIONAL OFFICE
2118 CUSHMAN STREET
FAIRBANKS, ALASKA 99701
(907) 456-4435

January 18, 1990

To: Rep. Johnny Ellis, Chair
Members, House HESS Committee

Re: House Bill No. 325;
"An Act relating to public school health and personal safety education."

NEA-Alaska supports and encourages your favorable consideration of HB 325.

While NEA-Alaska generally resists legislatively mandated curriculum and program the issues addressed in HB 325 are so critical to the interests of every child and therefore, to Alaska as well, that we feel it is time for this kind of legislation.

The increasing number of problems in the areas referenced in Sec. 14.30.360 (a) (1) of the bill give dramatic evidence to a critical need.

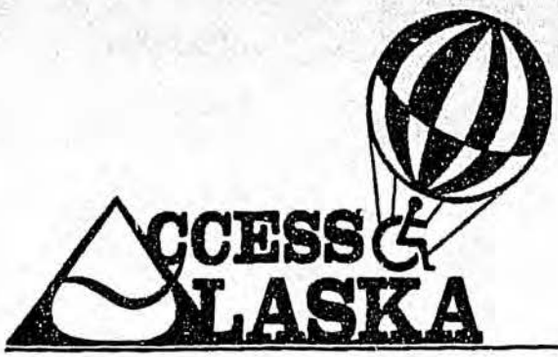
Traditional methods are simply no longer as effective as they once were. The changing dynamic of the family and the parenting process strongly suggest that public education is going to have to be more responsive than was necessary in the past. It is probably the only institution with the stability and longer range ability to deal with the increasing number of problems.

Parental involvement in and support for their child's education has changed as a result of both parents working, single parent families, and tragically, an increasing number of low income and poverty level children who have little or no support and guidance in their home.

The sponsor correctly notes in his September 28, 1989, memorandum that there will be some public criticism to having public education assume additional responsibility in this area. We encourage that you resist this criticism for the reasons stated by the sponsor; accurate information will help people make more intelligent decisions. It is important that every child have a reliable and available source of information on those things which are important to them.

Finally, it is important to recognize that many public schools may not have the necessary resources; financial, staff, and program; to meet the needs which currently exist and will undoubtedly increase in magnitude.

We strongly encourage the Committee to supplement this legislation with the additional financial support and Agency direction which will be needed for its effective implementation.



3710 Woodland Drive, Suite 900
Anchorage, AK 99517-2564
Toll Free: (800) 478-4488
(907) 248-4777

3550 Airport Way, Suite 3
Fairbanks, AK 99709-4772
(907) 479-7940

MEMORANDUM

TO: Representative Mark Boyer

FROM: Rick Tessandore, Deputy Director
Access Alaska, Inc.

DATE: February 2, 1990

SUBJECT: CSHB 325

I was in the Fairbanks L.I.O. this morning to testify in support of CSHB 325, but was not recognized.

As the President of the Arctic Alliance for People I support this bill, and specifically applaud your efforts to include local advisory groups into the planning of curriculum.

Wearing another hat, as Deputy Director of Access Alaska, I am interested in age appropriate instruction in physical health and personal safety with emphasis on how these areas relate to people with disabilities. The Alaska Head Injury Foundation and Access Alaska would be able to provide technical assistance to the urban school districts and will try to help them develop curriculum topics that can be incorporated into our children's education.

Congratulations on the support you have received from the Board of Education and continued success on CSHB 325.

RT:cdk

ACTION FOR ALASKA'S CHILDREN January 1990

RESOLUTION
COMPREHENSIVE HEALTH EDUCATION IN ALL PUBLIC SCHOOLS

Whereas, One of the most important facets of knowledge that each of us can have is the knowledge and understanding of how we function as a human being; and

Whereas, There are many serious social and grave health problems facing society and knowledge of these issues would mitigate some of the serious problems society is facing today and will continue to face in the future; and

Whereas, Health instruction to be effective must be continuous and culturally relevant and not episodic; and

Whereas, In many local school districts in Alaska, health education and physical education programs are combined, frequently fragmented into separate programs such as drug and alcohol abuse, venereal disease, enviromnental health, difficult to administer and virtualy ineffective; and

Whereas, Today the stress, strain and challenge of living in a tense, unstable world make health and vitality more important than ever, and good health means more than the absence of disease or infirmity - it means a state of complete physical, mental/emotional and social well being; therefore be it

Resolved, That Action for Alaska's Children strongly supports legislation or regulations that would mandate all school districts to put in place a comprehensive K-12 health education program in all Alaska's public schools; and be it further

Resolved, That a unified, well-planned, sequential curriculum k-12 grades be developed with parent and other adult involvement and that teachers be adequately trained to teach the subject in all Alaska school districts.

Nancy Shannon, RN
West High
Phone: 274-2502

Carolyn Turner, RN
Chinook - 243-2166
Girdwood - 783-2313

LeMay Christianson, RN
Career Center/Save II
Phone: 278-9631

Eileen Albert, RN
Fire Lake
Phone: 696-0064

Karen Sedlacek, RN
Muldoon 337-9591
Chester Valley 337-9502

7	Physicians
1	Dentist
1	DHHS Division Manager for Nursing
1	Psychology Supervisor
1	Elementary Principal
6	School Nurses/Supervisor
1	Risk Manager, ASD
1	Executive Director Curriculum & Instruction, ASD

Copies of agenda & minutes to:
Dorothy Oetter
Bill Mell
Bob Christal
Penny Potter
School Board Pres.,William Frick
Superintendent, Dr. William Coats

ANCHORAGE
SCHOOL DISTRICT

4600 DeBarr Avenue
P.O. Box 196614
Anchorage, Alaska 99519-6614
AREA CODE [907] 333-9561

Medical Advisory Committee

January 24, 1990

The Honorable Mark Boyer
P.O. Box V
Alaska State Legislature
Juneau, AK. 99811

Dear Mr. Boyer,

The Medical Advisory Committee of the Anchorage School District supports comprehensive health education for Kindergarten through 12th grade students in House Bill 325.

Sincerely,

James Patterson, MD
Chairman, Medical
Advisory Committee

ACSA
ALASKA ASSOCIATION OF ELEMENTARY SCHOOL PRINCIPALS
ALASKA ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS
ALASKA ASSOCIATION OF SCHOOL ADMINISTRATORS

• ALASKA COUNCIL OF SCHOOL ADMINISTRATORS •
326 Fourth St., Suite 408 Juneau, Alaska 99801 586-9702

HB 325 "An Act relating to public school health and personal safety education,"

The Alaska Council of School Administrators supports the concept of HB 325 in designing a comprehensive health and safety education curriculum and encourage the continued development of this piece of legislation.

While the issues spoken to in the concept of health and personal safety are so important to the lives of young children, so are many other basic aspects of a child's learning and consequently we feel uncomfortable about the idea of mandating this curriculum in our Alaskan schools over other basic areas.

We feel, because of the complexity and number of issues needing to be addressed, that a strategic plan be made to systematically approach the intent of this legislation.

Some of the problem areas needing to be addressed include: the development of curriculum in many of these area; finding qualified instructors or training instructors to be qualified to teach these concepts; soliciting parental approval and support in the beginning and where to incorporate the needed time within the existing school day.

We also feel this issue needs to be addressed by the State Board of Education as it is included into the educational outcomes they are developing for the State of Alaska.

It is without question that knowledge in each of the areas outlined within this bill are very important to survive in society today. We would like to express our willingness to work with Representative Boyer in the further development of HB 325.

Alaska Health Education Consortium

COMPREHENSIVE SCHOOL HEALTH EDUCATION RESOLUTION
84-2

The Alaska Health Education Consortium

Recognizing that many of the leading health problems in Alaska, including accidental injuries, substance abuse, dental disease, and lack of proper nutrition, are greatly affected by an individual's lifestyle and personal health habits, and

Acknowledging that an effective approach to promoting positive health habits is through the schools where children can learn the necessary skills to adopt and maintain healthy practices and lifestyles that affect the rest of their lives, and

Noting the expansive list* of national organizations that support school health education, and

Recognizing that in Alaska, AS.1430.360(a) states "Each district in the state public school system shall be encouraged to initiate and conduct a program in health education for kindergarten through 12.", and

Noting that the Alaska Area Native Health Service and Native Health Corporations with Health Education Programs have long range goals of implementation of school health education, and

Noting that the "Governor's Task Force on Effective Schooling 1981" recommends "health" as required curriculum in grades K-12, and

Knowing a "Criteria for Excellence: Health Education Programs in Alaska" has been developed by Department of Education, and

Noting that the State Health Plan for Alaska has adopted a goal stating, "Comprehensive Health Education should be provided to all students in grades K through 12 in Alaska's Public Schools".

Therefore be it resolved that the Alaska Health Education Consortium supports required comprehensive, sequential programs of health education, Kindergarten through Twelfth grade, for all students in Alaska's public and private schools.

*

American Association of School Administrators
American Alliance for Health, Physical Education, and Recreation, AAHPER
American Association for the Advancement of Health Education
Joint Committee on Health Problems in Schools of the National Education Association and the American Medical Association
National Association of State Boards of Education
National Association of Secondary School Principals
Sex Education and Information Council of the United States
National Association of Elementary School Principals
American Academy of Pediatrics
American Dental Association
American Medical Association
American Public Health Association
American School Health Association
Council of Chief State School Officers
Department of Health and Human Services
Department of School Nurses, NEA
International Union for Health Education
National Health Council
School Health Education Study (1961-1972)
Society of Public Health Education
National Congress of Parents and Teachers
National Education Association
National School Boards Association
Society of Nutrition Education

→ Feb. 26 + 27 mtg.

cufbill file-
HB325

9456 LaPerouse Ave.
Juneau, Alaska 99801
Feb. 12, 1990

Representative Mark Boyer
P.O. Box V
Juneau, AK 99811

Dear Mr. Boyer:

I am writing this in support of HB 325 --"An Act relating to public school health and personal safety education"-- at the request of the Executive Board of Church Women United in Alaska.

Church Women United is a national, ecumenical movement of Protestant, Catholic and Orthodox Christian women. The growing impoverishment of women and children is a major concern of CWU.

Convinced that teen pregnancies and alcohol and substance abuse play extremely large roles in the cycle of increasing poverty, we support the provisions of HB 325.

Sincerely yours,

Mary Lou Knickerbocker

Mary Lou Knickerbocker, Acting Secretary
Church Women United in Alaska

To: Representative [illegible]

From: John [illegible]

Date: October [illegible], [illegible]

Subject: Personal Response [illegible]

Dear Representative [illegible]

This letter is in response to your House Bill 125, which was introduced to me by your memorandum, received a couple of days ago.

First off, I am in complete support of your efforts to have these education modalities introduced into the Alaska School System. I feel that there is a necessary and progressive need for these prevention programs. In the third paragraph you stated that there are some who will provide strong critizism to the subjects relating to human sexuality. I would like to strongly remind these opponents, that the statistics on teenage pregnancies are getting almost to unmanageable proportions. If we don't educate these children now, the rate for these unwanted pregnancies will continue. And if you want the sexually transmitted diseases to continue upward, then they can turn their heads at the issues. Ask them if they have ever seen someone die of AIDS, it's not very pretty.

I firmly believe that the education of the child should start in the home. But as this society has seen, the home is as much, if not more dysfunctional. So when the child gets into difficulty within societies structure, the first thing the parents want is for the community to take care of THEIR uncontrolable child and the problems they present. Just as a suggestion, maybe include a section of that bill that requires the parent or parents to attend some of those classes also.

One of the situations that I have seen, worked with and experienced, is that the Alaskan School System, not being much different from others around the country, seem to have their share of instructors and administrators, who are reluctant to put forth the effort and extend quality education, beyond the class room or an eight hour day. So to introduce progressive, needed programs of education for our children, might force these people to do a little more than what is currently the norm in the school system.

As a rough statistic, there are over 20 million practicing alcoholics in this country. Close to 30 percent are teenagers. If the legislators choose to ignore those figures, then they will choose to also ignore the rising sexual transmitted diseases as

Allow me to emphasize that this bill is in no way "anti-family." In fact, it contains a measure which fosters the cooperative relationship between family and school on behalf of the students. I refer to the provision for "training, support groups, and literature designed to encourage parents and others to participate in health education." This is a need which has become apparent to teachers as they study the issue of "Youth at Risk" in our Alaskan communities. They are well aware that it is not the function of schools to take the place of parents on these crucial issues; rather they want to work in tandem with parents to provide healthy, happy, successful Alaskan children and adults.

Part of our agency's mandate is to present parenting information whenever and wherever needed; we know the difference that information can make in the lives of both parents and children. We are already working with teachers and counselors to help provide parenting information so they, as education professionals, can assist parents in need of more information. This is part of our mission, and we stand ready to provide even more assistance to schools in our community when this bill becomes law.

We, the adults of Alaska, have a responsibility to those who come after us. We must not leave a legacy of spiraling poverty, illness, and ignorance. We <u>must</u>, on the other hand, take this opportunity to provide information on life choices and alternatives, so that our next generations can live as whole, healthy citizens of the 21st Century.

Respectfully,

RESOURCE CENTER FOR PARENTS AND CHILDREN

Patricia C. Clark, Advocacy Committee Member

RESOURCE CENTER FOR PARENTS AND CHILDREN
1401 KELLUM ST
FAIRBANKS AK 99701
15 FEBRUARY 1991

TESTIMONY ON BEHALF OF [illegible]
PUBLIC SCHOOLS HEALTH AND SAFETY [illegible]

On behalf of the children of Alaska, we urge you to pass House Bill 325, mandating health and safety education for Alaska's school children.

Our organization works with victims of child abuse and child sexual abuse. Often we find a generational pattern within families, in which abused or neglected children grow up without parent models, ignorant of parenting skills, indeed lacking knowledge of very basic facts of life and living which would enable them to survive and prosper in our society.

We have all heard the phrase "children having children." Our agency sees the reality of this new catch phrase. What it means to us is children born into neglect and ignorance, to parents who are totally unprepared for the realities of raising a happy, healthy child. These parents may or may not have gotten through school themselves. Even if they have, however, the fact is often that they have never received any information on their sexual choices, physical care, individual rights, and parenting. Thus they are frequently thrust into a situation for which they are totally unprepared, with dependency on a benevolent state bureaucracy as their only choice.

The fate of our children and grandchildren hangs in the balance. As adults and policy makers now, we have two options. We can ignore the need for preventive neasures, pass harsher laws for substance abuse, and produce more and more citizens dependent on welfare programs, subject to the threats of drug abuse, AIDS, and suicide. Remember, these factors ar prevalent <u>now</u>; our kids are threatened by these social ills <u>today</u>. The argument that including them in the school curriculum will cause more such problems is specious at best, and criminally ignorant at worst.

Our second alternative is to pass legislation such as HB 325. As a parent, teacher, and counselor, I know that drug, health, and values education comes too late if it waits till Junior High school. I have seen 12 year old girls pregnant, who virtually didn't know how they got that way. I have seen 12 year old boys strung out on drugs, who have been exposed to all the scare tactics in our communications systems, still unwilling to believe that anything bad is happening to them, still unable to make the rational, healthy choices which could bring them out of their dependency. These, my friends, are the "children having children." The circle is there, and it is only education which will break that circle.

STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: CSHB 325 (HESS)
PUBLISH DATE:

FISCAL NOTE #1

REQUEST:

Revision Date:
Title: Public School Health & Personal Safety Education.
Sponsor:
Requestor:

Agency Affected: Education
BRU: Education Program Support.
Components: Basic Education.

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	140.6					
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS	100.0					
MISCELLANEOUS						
TOTAL OPERATING	240.6					

CAPITAL						

REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND	240.6					
FEDERAL FUNDS						
OTHER						
TOTAL	240.6					

POSITIONS:

FULL-TIME	0					
PART-TIME	0					
TEMPORARY	0					

ANALYSIS: (Attach a separate page if necessary)

300 - Contract for 1) leadership in establishing a plan for a health education 2) training programs for teachers including travel of teachers and consultant/trainers.

700 - Grants - 50% of funds for use in learning about and trying what works elsewhere and 50% original ideas of teachers and administration.

Prepared by: Ronald L. Larson, Chair Phone: 465-3727
Division: Co-Chair, House Finance Committee Date:

Approved by Commissioner: Date:
Agency:

Distribution (by preparer):
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STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: CSHB 325 (HESS)
PUBLISH DATE:

FISCAL NOTE 2

REQUEST

Revision Date:
Title: Public School Health & Personal Safety Education
Sponsor:
Requestor:

Agency Affected: Education
BRU: Education Program Support
Components: Basic Education

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	140.6					
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	140.6					
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND	140.6					
FEDERAL FUNDS						
OTHER						
TOTAL	140.6					

POSITIONS:

FULL-TIME	0					
PART-TIME	0					
TEMPORARY	0					

ANALYSIS: (Attach a separate page if necessary)

Same as note # 1 except for ommission of grants

Prepared by: Ronald L. Larson, Chair
Division: Co Chair, House Finance Committee
Phone: 465-3727
Date:

Approved by Commissioner:
Agency:
Date:

Distribution (by preparer):
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STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: CSHB 325 (HESS)
PUBLISH DATE:

FISCAL NOTE #3

REQUEST:

Revision Date:
Title: Public School Health & Personal Safety Education.
Sponsor:
Requestor:

Agency Affected: Education
BRU: Education Program Support.
Components: Basic Education.

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	140.6					
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS	200.0					
MISCELLANEOUS						
TOTAL OPERATING	340.6					

CAPITAL						

REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND	340.6					
FEDERAL FUNDS						
OTHER						
TOTAL	340.6					

POSITIONS:

FULL-TIME	0					
PART-TIME	0					
TEMPORARY	0					

ANALYSIS: (Attach a separate page if necessary)

Same as note #1 with additional funding to school districts to cover cost of mandated advisory committees at an average of $1852/district.

Prepared by: Ronald L. Larson, Chair
Phone: 465-3727
Division: Co-Chair, House Finance Committee
Date:

Approved by Commissioner:
Date:
Agency:

Distribution (by preparer):
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STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: CSHB 325 (HESS)
PUBLISH DATE:

FISCAL NOTE #96

REQUEST:

Revision Date:
Title: Public School Health & Personal Safety Education.
Sponsor:
Requestor:

Agency Affected: Education.
BRU: Education Program Support.
Components: Basic Education.

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL	40.6					
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS	200.0					
MISCELLANEOUS						
TOTAL OPERATING	240.6					
CAPITAL						
REVENUE						

FUNDING: (Thousands of Dollars)

GENERAL FUND	240.6					
FEDERAL FUNDS						
OTHER						
TOTAL	240.6					

POSITIONS:

FULL-TIME	0					
PART-TIME	0					
TEMPORARY	0					

ANALYSIS: (Attach a separate page if necessary)

300 - Department contract for an employee (part-time) to pull together materials adapted by school districts.
700 - Grants to school districts
100.0 - Incentive - research
100.0 - expense of advisory committees at an average of $1,852/district.

Prepared by: Ronald L. Larson, Chair
Phone: 465-3727
Division: Co-Chair, House Finance Committee
Date:

Approved by Commissioner:
Date:
Agency:

Distribution (by preparer):
Legislative Finance
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Office of Management and Budget
Impacted Agency(ies)

page ___ of ___

STATE OF ALASKA
1990 LEGISLATIVE SESSION

BILL VERSION: HB 325
PUBLISH DATE:

FISCAL NOTE

REQUEST:

Revision Date:
Title: Public School Health and Safety Education
Sponsor: Rep. Boyer, et al
Requestor: House HESS

Agency Affected: Public Safety
BRU: Council on Domestic Violence and Sexual Assault
Component:

EXPENDITURES/REVENUES: (Thousands of Dollars) (Inflation not included)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0
CAPITAL	0	0	0	0	0	0
REVENUE	0	0	0	0	0	0

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER/PROG RCPT						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

ANALYSIS: (Attach a separate page if necessary)

The Council would provide technical assistance in developing the curriculum. It will have no fiscal impact on the Department of Public Safety.

Prepared by: Barbara Miklos, Executive Director
Phone: 465-4356
Division: Council on Domestic Violence and Sexual Assault
Date: 1/19/90
Approved by Commissioner: Arthur English
Date: 1-22-90
Agency: Department of Public Safety

1/22/90

BILL NO: HB 325 DATE: January 22, 1990

TITLE: Public School Health and Safety Education CONTACT: Barbara Miklos 465-3456

DEPARTMENT OF PUBLIC SAFETY

The Council on Domestic Violence and Sexual Assault supports HB 325 "An Act Relating to public school health and personal safety education". This bill requires school districts to initiate and conduct a program in comprehensive health education for kindergarten through grade 12. Present law "encourages" such a program. Included in the required curriculum is sexual abuse, domestic violence and parenting instruction.

At least 25% of the women in Alaska have been victims of domestic violence. More than a third of those women reported that their children were direct victims of violence, and all children raised in violent homes suffer emotional trauma. Nationally, at least 1/4 of girls and 1/10 of boys will be victims of child sexual abuse before they are 16. Children who are raised in violent families or other dysfunctional families often have poor role models for being parents. They should be taught how to parent so their children are protected from violence. In order to be able to protect themselves, know where to get help and/or prevent themselves from being caught up in domestic violence; children need information about these subjects.

Many schools are providing instruction in domestic violence, sexual assault, child abuse and parenting. However, many are not. In order to stop the cycles of violence, we must reach children in all schools. Therefore, the Council supports making health education and personal safety curriculum mandatory.

Arthur English
Commissioner