

ALASKA LEGISLATURE COMMITTEE FILES 1991-1992 8672

7419 SENATE HEALTH EDUCATION & SOCIAL SERVICES

The Problem:

Too many Minnesota teenagers are unable to make informed, responsible decisions about sex.

The Facts:

Minnesota does not require sex education, presented in developmentally appropriate ways, through the schools. There is no organized effort to educate parents so they can accurately discuss sex with their children. In fact, the words "sex education" don't exist anywhere in Minnesota statutes.

In many school districts, students don't begin studying biology before age 16, even though the onset of sexual activity for many youngsters is at age 13 or 14. High school students often receive training on how to pay rent, do their taxes, set a household budget and sometimes parenting education. But not sexuality education that could interrupt the costly cycle of unintended teenage pregnancies. About half of those pregnancies end in abortion.¹⁵

In 1983, the Minneapolis-based Search Institute asked 8,000 youths if they would be interested in a program on understanding sex better; 79 percent said "yes."¹⁶

Ten thousand parents were asked if they were interested in programs that help PARENTS learn more about sex education; 45 percent said "yes."

In 1986, the Search Institute conducted a teenage pregnancy survey¹⁷ for the City of Minneapolis, surveying 317 randomly selected city adults, 149 elected or appointed city officials and 232 officers or executives of community organizations. The results:

When asked if they thought sex education and family planning encourages teenage sexual activity, a mere 9 percent of public officials, 6 percent of community leaders, and 19 percent of the general population said they thought it did. Obviously, most respondents do not fear increases in sex education and family planning for their children will lead to sexual activity.

Seventy-seven percent of community leaders and 61 percent of the general population believed sex education should be provided in elementary schools (grades 1 to 6). At the junior high level, more than 90 percent of respondents in each category felt sex education should be taught.

As far back as 1948, the Minnesota Poll showed that 75 percent of adult Minnesotans thought high school students should receive sex education and 57 percent thought it should be taught in grade school.¹⁸ It's time to give Minnesotans what they have wanted for more than 40 years — sex education in the schools.

Recommended Solutions:

- Require each school district to offer developmentally and socially appropriate sex education for grades K-12 taught by certified health educators, including information on male responsibility, decisionmaking and resistance to peer pressure.
- Develop programs to train parents to talk to their children about sex.
- Replace the term "family life" with "family life and sex education" in Minnesota statute. We must confront problems of teenage sexuality openly and honestly, without hiding behind euphemisms.

What Won't Work:

Listening to the vocal minority who insist, despite concrete evidence to the contrary, that providing teenagers with accurate information about sexuality and family planning will encourage sexual activity. Their vocal opposition is preventing schools from offering programs that could significantly reduce teenage pregnancies and abortions and that lead to a healthier teenage population.

The Problem:

Minnesota teenagers, especially in Greater Minnesota, can't get health care and birth control to prevent pregnancy and the spread of sexually transmitted diseases, including AIDS.

The Facts:

Here in Minnesota, we have a marvelous example of the benefit of school-based health clinics. The private, nonprofit HealthStart has operated school-based health clinics in the St. Paul Public Schools since 1973.

A follow-up study of more than 150 prenatal patients at the clinics who had babies between 1974 and 1981 showed that 80 percent completed high school. ¹⁹ Of those, the repeat birth rate was 1.3 percent. That compares to national data showing just 49.9 percent of teen mothers graduating and repeat birth rates within a year of the first birth of over 17 percent.

In addition to prenatal and family planning care, the clinics provide physicals, psychological counseling, weight control and nutrition counseling.

Yet school-based clinics are unavailable in most Minnesota school districts. Those who fear these clinics will become a conduit for abortion services and those who believe sexuality education fosters sexual activity are preventing the tremendous benefits these clinics could provide for thousands of Minnesota teenagers.

As of October 1, 1989, only the 16,121 teenagers in Minneapolis and St. Paul high schools had access to on-site school health clinics --- just 7.6 percent of the state's 210,986 high school students.

Increasingly, as students seek treatment in those clinics for sexually transmitted diseases, they are revealing histories of multiple sexual partners, according to Donna Zimmerman, executive director of HealthStart. That dramatically increases their risk for getting and spreading AIDS.

In 1989, 230 St. Paul high school students were treated at school clinics for sexually transmitted diseases. Once the clinics begin testing for viral venereal warts, that number is likely to jump considerably, Zimmerman said.

In the 1986 Search Institute survey for the City of Minneapolis, respondents were asked if junior and senior high school students should get information on birth control at school. ²⁰ Eighty-eight percent of public officials agreed they should, 85 percent of community leaders agreed and 78 percent of the general public agreed.

This is an area where Minnesota can learn a lot from the experience of other countries. In the 1988 study "Unintended Pregnancy, Contraceptive Practice and Family Planning Services in Developed Countries," researchers found that countries with the lowest abortion rates have the best accessibility to abortion, birth control services and sexuality education. ²¹

Recommended Solutions:

- Appropriate funds and require each school district or consortium of schools to establish a school-based health clinic.
- Require a minimum number of students necessary for each clinic to encourage districts to join in their efforts. In rural areas, consortiums could employ roving registered nurses and doctors, on the model of the old visiting nurse, to provide medical staffing for clinics.
- Require parental consent for use of clinics, within the parameters established in the Minnesota Minor Consent Law.

What Won't Work:

Prohibiting school clinics from dispensing contraceptives in the false belief that will limit teenage sexual activity. Teenagers struggle to use birth control under the best, most supportive conditions. If they don't have access to it, they don't stop having sex, but they do get pregnant and contract diseases.

The Problem:

Minnesota teenagers lack adequate options for becoming informed about abortion under the current parental notification law.

The Facts:

Minnesota teenagers who want an abortion are required to inform BOTH biological parents or seek a judicial waiver of that notification by appearing before a judge. The state's goal: to foster family communication.

In reality, mandatory parental notification does little to foster family communication. Women who would tell their parents without a law will do so with a law, and the rest will seek a judicial bypass. But that final option intimidates young women from acting early, sometimes delaying abortions into the second trimester, when the risk of complications increases.

From 1981, (when the law was enacted), to 1986 (when a federal judge suspended it), 7,200 teenagers sought abortions. Of those, 3,600 appeared in court rather than inform their parents, with one-fourth of those teens appearing before the judge with one parent by their side.

In Minnesota, teens are required to notify both parents even though only half of the state's minors live with both biological parents and a third live with only one parent.

Recommended Solutions:

- Enact a "Trusted Adult" statute to protect teenagers' privacy rights while ensuring their rights to and need for counseling. Teenagers could choose another adult relative, such as grandparents, aunts or uncles, or turn to a trained counseling professional, including the clergy, to fulfill the notification requirement in the law.

The Problem:

Young men do not take equal responsibility for preventing pregnancy.

The Facts:

In 1985, 1,031,000 American teenagers became pregnant — 31,000 younger than age 15. Young women facing tough decisions of becoming single teenage mothers, giving up their babies for adoption, or terminating the pregnancy did not become pregnant in a vacuum. We do not teach young men responsible sexual behavior and ways to use contraception as protection against unintended pregnancy, sexually transmitted diseases, and the AIDS virus. We have neglected them, unfairly placing the burden of sexual responsibility on young women.

There are scattered programs that address male responsibility. But there is no comprehensive, consistent approach employed in Minnesota.

Young men need greater knowledge about their sexuality and responsibility, they need access to birth control, and they need to learn to communicate with young women about birth control. Most of all, they need a strong, unequivocal message from many directions that **THEY ARE RESPONSIBLE FOR PREVENTING UNINTENDED PREGNANCIES.**

Recommended Solutions:

- Appropriate funds to the Department of Education to provide challenge grants to develop male responsibility pilot programs, encouraging public-private partnerships and traditional men's and boys' service organizations to lead the way.

What Won't Work:

Fear that giving young men access to birth control and information will make them more sexually active. In the Minnesota Department of Education, Learner Support Systems survey of 91,175 public school students, of the 35% of 9th grade boys who reported having had sexual intercourse, just 37 percent of that group reported always using birth control. ²³ Withholding information and services isn't stopping sexual activity, it is just making it more dangerous to Minnesota teens.

The Problem:

Further abortion restrictions would carry an enormous price tag.

The Facts:

In Minnesota, we require fiscal impact statements and environmental impact statements for many controversial projects. Unfortunately, Minnesota fails to require fiscal impact statements for abortions restrictions, which carry an economic impact that could be devastating.

A fiscal note prepared during the 1990 Legislative Session on S. F. 1688 (a bill that would ban up to 93 percent of all abortions) indicated that just the legal and administrative costs of implementing and defending the law would have totaled \$296,000. ²⁴

That fiscal note did not include an estimate of AFDC and Medical Assistance costs, but the Senate Research staff prepared a conservative estimate of those costs if Minnesota adopted such a bill banning 90 percent of the 15,000 to 16,000 abortions women seek each year.

For the fiscal analysis, Senate researchers calculated how many women seeking abortions are single (85 percent) and what proportion would become AFDC recipients based on the current proportion of single women with children under age 6 who go on AFDC (67 percent).

They assumed that half the women presently obtaining abortions would go out of state for abortions. They assumed that half of the remainder would put their child up for adoption.

Even with their cautious estimating procedures, the researchers calculated that by Fiscal Year 1993, S.F. 1688 would have cost a total of \$34,186,919 in additional AFDC and Medical Assistance. Of that total, \$13,879,559 would be paid for by Minnesota taxpayers. ²⁵

Recommended Solutions:

- Require on any bill to limit access to abortion a full fiscal impact statement.

1

Minnesota cut family planning by \$195,000 between 1979-91. Of the \$2 million appropriated for family planning special projects in the 1988-89 biennium, \$500,000 - 1 out of every 4 dollars - was not spent on medical methods of contraception. ⁴⁰

The Economics of Unintended Pregnancies

Beyond the human toll of unintended pregnancies and inadequate prenatal care, there is an economic cost.

3

Almost half of all Minnesota families on AFDC began with a teen birth. Teen parents stay on welfare longer than most families. ²⁵

5

In 1987, the U.S. spent \$21.5 billion on families begun when the mother was a teenager. Minnesota spent \$503 million that year on AFDC, Medicaid and Food Stamps for these families; that does not include housing, special education, child protection, foster care, daycare or other services.

Arguments Against Preventing Unintended Pregnancies:

Some argue society is not well served by preventing unintended pregnancies. They say we need more citizens to pay into Social Security, to keep the labor pool going, to ensure a supply of soldiers and to prevent consolidation of school districts. We value our children as more than that, and find those arguments short-sighted and offensive.

8

If the bill to ban 93% of MN abortions had passed the legislature last session, AFDC and Medical Assistance costs would have been \$34,186,919 by 1993. MN's share would have been \$13,879,559. ²⁵

2 Taxpayers save \$4.40 for every dollar that the government spends on family planning, according to a 1990 study by Alan Guttmacher Institute. ³⁹

4 It costs \$1600 per day during an average 23-day stay to care for a premature baby in the Neonatal Intensive Care Unit of St. Paul Children's Hospital. Low income women are at disproportionately high risk for preterm births.

6 \$5,337.97 was one day's cost to St. Paul police for handling a demonstration by anti-abortion activists and processing the illegal blockers of a Planned Parenthood clinic June 22, 1990. ²⁶

7 If all first births to teenage mothers in 1986 alone could have been delayed past age 19, savings in public costs over 20 years would have been \$2.2 billion in 1986 dollars. ⁴¹

9 The cost of administering that same bill (to ban 93% of abortions) and defending it in court was estimated at \$296,000. In a fiscal note prepared by the state.

The Problem:

Illegal blockades at medical facilities providing abortions prevent people from reaching legal medical care.

The Facts:

An elderly woman trying to reach her cardiologist is blocked by protesters trying to shut down Midwest Health Center for Women in the same building. A Planned Parenthood vasectomy clinic — an effective way to reduce the abortion rate — is delayed by anti-abortion protesters blocking the doors.

Certainly there is room in our society for everyone to express opinions without this dangerous infringement on the rights of others. Moving picket lines are a legal way to express an opinion. Blocking doors is not, but the penalties (in most cases a misdemeanor fine of \$25) have not deterred illegal blockades.

The current penalties also aren't enough to cover the taxpayers' cost of numerous police officers working for hours to remove those who illegally blockade buildings, take them to the police station, book them and appear in court.

The following is an estimate by St. Paul police of the cost for policing service at a demonstration by anti-abortion activists at the Ford Parkway Planned Parenthood clinic in St. Paul on June 22, 1990.²⁶ The figures include staffing the demonstration site, processing and booking demonstrators and funds lost to the city because demonstrators injured an officer who was unable to work for five days.

THE COST OF ONE MORNING OF ILLEGAL BLOCKADING/ JUNE 22, 1990

Cost in wages.....	\$4,513.57
Cost in equipment.....	\$30.00
Cost in lost wages due to officer injured by demonstrators.....	\$800.40

TOTAL COST TO POLICE.....\$5,333.97

(Does not include court costs and some administrative costs.)

Recommended Solutions:

- Prohibit persons from interfering with access to medical facilities. Maryland passed such a law in 1989.
- Attach fines high enough to deter future violations and to cover the cost to police of arresting and prosecuting violators.

What Won't Work:

Assuming that all citizens have the restraint to use their First Amendment rights in a way that does not cause physical danger to their fellow citizens or seriously infringe on the rights of others to seek legal medical care.

The Problem:

Efforts to prevent unintended pregnancies lack the coordination needed to be effective.

The Facts:

Many people in Minnesota are trying to grapple with the immense problem of unintended pregnancies. But without central coordination, their efforts are piecemeal and ineffective.

The numbers speak for themselves: In 1987, 8,845 Minnesota teens became pregnant and 4,856 gave birth. Of those, 1,588 were to girls under age 17.²⁷

Minnesota's very responsible corporate community needs to be drawn further into this complex issue, where their expertise and resources would be invaluable.

In April, 1990, the Interagency Adolescent Pregnancy and Parenting Team Prevention Project (operating through the Minnesota State Planning Agency) issued a proposal aimed at developing a comprehensive public/private approach to adolescent pregnancy and poor decision making skills among adolescents.

The data in that proposal provides a glimpse of how far-reaching the effects of adolescent pregnancy and decision-making can be for individual Minnesotans and for the state:

"In addition to being a major factor associated with adolescent pregnancy, poor decisions among adolescents are also related to other risk taking behaviors . . . Poor decision-making among adolescents has been cited as a major correlative with truancy, high school dropouts, behavior problems, substance abuse, and criminal activity. Moreover, adolescents' inability to make sound, long term decisions about life options have socioeconomic effects in adulthood."

Recommended Solutions:

- Establish, in accordance with the Interagency Adolescent Pregnancy and Parenting Team Prevention Project recommendations, a project to develop a common strategy for decreasing adolescent pregnancy and improving decision-making skills among teens. The project would be housed within the State Planning Agency for a five-year trial period while its effectiveness is monitored. After that, it would be appropriately placed in the Department of Human Services.
Among the project's goals would be:
 - 1) To improve coordination and collaboration of state and local agencies and community groups on the issues of adolescent pregnancy and decision-making in Minnesota.
 - 2) To help communities in the implementation of innovative programs that increase problem-solving ability and improve life options of adolescents.
 - 3) Establish a Minnesota affiliate of the National Organization on Adolescent Pregnancy and Parenting.
 - 4) Establish a state clearinghouse on adolescent pregnancy prevention and decision-making approaches and programs.
 - 5) To establish adolescent pregnancy prevention and decision-making programs in ten targeted Minnesota communities.
 - 6) To adapt programs and strategies for use in areas with cultural differences.
 - 7) To provide technical assistance to communities seeking to develop their own program.

The Problem:

The number of low birth weight and premature babies remains high because many low-income women do not use prenatal care already available.

The Facts:

For women who choose to carry babies to term, good prenatal care is essential. Appropriate prenatal medical care and support often can allow babies at risk for pre-term birth or low birth weight to be born healthy, at full term. When that preventive care is not used, however, the cost of caring for premature babies — many with long-term disabilities — is high.

Many low income women are not informed of or urged to use programs already in place that could ensure better pregnancy outcomes. Many women with incomes between 100 percent and 185 percent of the federal poverty level are eligible for free prenatal care but never apply.

Of the approximately 67,000 births in Minnesota each year, as many as 25 percent are to low-income women. But a deeply disproportionate estimated 50 percent of the high risk births in Minnesota occur in that group, according to Dr. Carolyn McKay, director of Maternal Child Health for the Minnesota Department of Health.

Dr. McKay estimated that 50 percent of those high risk births could be predicted and steps could be taken to ensure better pregnancy outcomes if early, prenatal care was used.

She said the reasons for the disproportion among low-income women include age, socioeconomic status, lack of social support, inadequate education and barriers to continuity in medical care.

A recent study of low-income women and prenatal care in Minneapolis showed that women in the city's poorest neighborhoods were twice as likely to have low birthweight babies as women in affluent neighborhoods. ²⁸

The costs of the remarkable medical technology that can keep premature and low birthweight babies alive is staggering:

As of August, 1990, the average cost of caring for an "average" preemie (born at 29 weeks gestation) was \$1,600 a day, according to data from the Neonatal Intensive Care Unit at St. Paul Children's Hospital. The average length of stay was 23 days. Some babies stay for a year. The more premature the baby, the longer the stay and the greater the cost. The most expensive case at Children's Hospital in 1989 was a premature infant whose care cost \$290,428.

Increasingly common in Minnesota are so-called "million dollar babies": Those pre-term babies who require long term care that literally exceeds a million dollars -- affecting taxes and insurance rates.

Money spent on prenatal care will produce more healthy babies and avoid costs. The money saved could be used to provide better prenatal care.

Recommended Solutions:

- ② Support and expand outreach programs for low income pregnant women at risk of delivering preterm or low birth weight babies, such as the fledgling media campaign being developed by the state Department of Human Services and the March of Dimes.
- ③ In urban areas, target money to strengthen efforts of community clinics. Tailor outreach to special urban populations.
- ③ In rural areas, provide money for a massive public awareness program. Printing a pamphlet to give to public assistance recipients isn't enough.
- ③ Support development of sexuality and reproductive health education programs to educate Minnesotans about the risk of unintended pregnancy and steps they can take before becoming sexually active to ensure healthier babies.

What Won't Work:

County-by-county efforts that leave service gaps.

The Problem:

Low income women have no right to choose; their health and safety is in jeopardy because medical assistance does not fund abortion services.

The Facts:

In Minnesota, only victims of incest, victims of rape who report the crime within 48 hours, or women whose lives are in danger (as certified by two doctors) are eligible for abortion funded by Medical Assistance. Beyond the cruelty inflicted by those limitations, there are women who face permanent health problems if they cannot get an abortion.

Pregnancy can be extremely dangerous for women with many conditions such as uncontrolled diabetes, severe heart condition or pulmonary hypertension. For women with cancer diagnosed during pregnancy, the life-saving treatment she requires can severely deform the fetus. Pregnant women experiencing extreme physical trauma from an accident, crime or violence may find pregnancy a barrier to their recovery.

There is growing research suggesting that when HIV positive women become pregnant, the pregnancy accelerates development of AIDS because pregnancy depresses the immune system. ²⁹ HIV positive women pass the deadly virus to their babies 50 percent of the time.

Some Medical Assistance eligible women who had second trimester abortions would have had safer first trimester procedures if funding had been available. ³⁰ Much time is lost scrounging around for money outside the state system.

Even if a low-income woman's doctor advises her not to get pregnant because of illness or hereditary factors, no birth control methods are 100 percent effective. For Minnesota to abandon these women in crisis is morally inexcusable and fiscally irresponsible.

Recommended Solutions:

- To ensure equal treatment, restore Medicaid funding for abortion services.

The Problem:

State-by-state approaches to abortion rights threaten to keep our legislatures and communities divided far into the next century.

The Facts:

There are too many pressing, important issues facing Minnesota, and all states, to allow this extremely divisive issue to be debated and re-debated in every state, year after year. We need to reaffirm the reasonable, ethical standards set forth in Roe vs. Wade before they are picked apart, state by state.

If those standards are not preserved, the United States will become a country where there are states in which it is unsafe to be a poor woman, or a teenager. We will risk the re-emergence of an illegal abortion industry. Without action at the federal level, we will continue to pour scarce state resources into arguing and re-arguing the fine points of this endless debate.

Recommended Solutions:

- Memorialize the U. S. Congress to enact the Right To Choose Act ³¹, writing into federal statutes the standards put forth in Roe vs. Wade. Only then will the laws of this country represent the majority view of Americans that the abortion decision is a private decision for a woman to make, not the domain of government.

What Won't Work:

Hoping the issue will be settled on a state-by-state basis. Believing that outlawing abortion in one state will stop abortions. It will change their location to another state or into illegal, hidden rooms where the health of women will be in danger. But it will not stop them. The path to reducing abortions is by preventing unintended pregnancies.

The Problem:

The prochoice sentiments of a majority of Minnesotans are not represented in the state legislature.

The Facts:

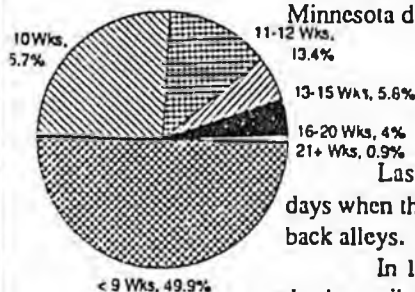
A July, 1989 Minnesota Poll showed 71 percent of Minnesotans believe women should be allowed to decide for themselves whether or not to have an abortion. ³²

In February, 1990, a Pioneer Press Dispatch/WCCO poll showed once again that nearly three in four Minnesotans believe abortion "is a decision every woman must make for herself." ³³ Six of 10 Minnesotans said government should not interfere in personal matters like abortion.

That poll also showed that by a 55-39 percent margin, Minnesotans don't believe that making abortion illegal would reduce the number of abortions actually performed.

Recent U.S. Supreme Court decisions indicate that the rational, compassionate standards set by Roe vs. Wade could disappear. It is important for Minnesota to codify those standards.

The fact is, Minnesota women are limiting when abortions are performed through their own private, rational decision making. The great majority of Minnesotans do not seek abortions after 10 weeks of pregnancy and very rarely obtain abortions after 21 weeks — usually only in cases of severe fetal anomaly or threat to the life or health of the mother. Here is a look at when abortions were performed in Minnesota during 1987, according to the Minnesota Department of Health.



← GESTATION AT TIME OF ABORTIONS IN MINNESOTA, 1987

Last year, the Legislature almost passed a bill that would have sent Minnesota women back to the days when the wealthy went elsewhere for safe, legal abortions while teenagers and poor women died in back alleys. This is what it was like:

In 1965, 193 deaths in the United States were attributed to illegal abortion — 17 percent of all deaths attributed to pregnancy and childbirth that year. ³⁴ Those numbers do not include the "hidden" cases, where unclear reasons for death were listed because of shame, fear and ignorance.

In 1985, after legalization, that figure had dropped to 3 percent of all pregnancy-related deaths. The percentage would be even lower if deaths caused by illegal abortions that persisted after legalization were subtracted. ³⁵

Abortion is safe only if it's legal. Before abortion was legalized in 1973, abortion procedures were not taught or researched. Women seeking help after incomplete illegal abortions showed up at hospitals and faced further risk even from "trained" medical personnel not familiar with abortion procedures.

We believe the recommendations in this report can significantly reduce the abortion rate without compounding the crisis of unintended pregnancies with the deaths of desperate women.

Prohibition doesn't work. Prevention does.

Recommended Solutions:

- Enact positive legislation relating to abortion on the model of recent Connecticut legislation that follows the guidelines set by Roe vs. Wade. ³⁶ Under such a law, the state cannot restrict a woman's decision to terminate her pregnancy during the first stage of pregnancy. In the second stage, up to the point of viability (about 24 weeks), the state could enact laws consistent with protecting the health of women. In the third stage, abortion could be restricted. Exceptions in the last stage would only allow for abortion in very rare, very tragic situations in which the life or health of the woman was at risk or fetal anomaly inconsistent with sustained life were present. In 1987, in Minnesota, just nine-tenths of 1 percent of abortions were performed after 21 weeks of pregnancy.

The Problem:

Family planning research is not funded.

The Facts:

Minnesota enjoys a proud reputation in most areas of medical research. With exceptional facilities at the University of Minnesota and the Mayo Clinic, it should be known throughout the world for contraceptive research.

It's not. There is almost no research into better, safer, more effective birth control being conducted by Minnesota researchers because there is no state support. To reduce the abortion rate and teen pregnancy rate, we must improve contraceptives.

Even when used properly, presently available birth control methods fail. The following are the number of pregnancies that will occur per 100 women using various forms of birth control over a one year period.³⁷

<u>METHOD</u>	<u>PREGNANCIES PER 100 WOMEN</u>
Voluntary sterilization.....	Less than one
Birth Control Pill.....	2.5
Intra Uterine Device (IUD) with copper.....	2
IUD without copper.....	4
Condom with foam.....	10
Condom without foam, unmarried.....	11
Condom without foam, married.....	14
Diaphragm or cervical cap.....	18
Sponge.....	18
Contraceptive foams, creams, jellies and suppositories.....	20
Withdrawal.....	20
Fertility awareness.....	24
No method.....	60 to 80

That means for every 100 women who consistently use birth control pills — the most effective method — more than two will become pregnant anyway.

Recommended Solution:

- Appropriate funds for the Commissioner of Health to contract for medical method birth control research, including research into male birth control methods, and research and testing of RU486 and Depo Provera.

What Won't Work:

Offering only natural family planning or abstinence as alternatives, relying on current methods, allowing intimidation to prevent testing of RU486. In addition to providing safe, extremely early abortions in other countries, RU486 shows potential for successfully treating breast cancer, prostate cancer, endometriosis and Cushing Syndrome.³⁸ Americans who suffer from these conditions have this avenue of treatment blocked by anti-abortion forces who lobby against testing this drug in the United States. The American Medical Association has strongly endorsed testing of RU486.

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- 38) Regelson, William; Loria, Roger; Kalinai, Mohammed, *"Beyond 'Abortion': RU-486 and the Needs of the Crisis Constituency,"* *Journal of the American Medical Association*, Vol. 264, No. 8, August 22/29, 1990, pp. 1026-1027.
- 39) Forrest, J. Darroch and Singh, Susheela, *"Public Sector Savings Resulting from Expenditures for Contraceptive Services,"* *Family Planning Perspectives*, Vol. 22, No. 1, Jan./Feb. 1990, pp. 6-15.
- 40) Minnesota Department of Health, Maternal Child Health, *Family Planning Special Project Grants Appropriated Funds,"* 1979-1991.
- 41) The Center for Population Options, Washington, D. C., *"Estimates of Public Costs for Teenage Childbearing,"* 1987 Report.
- 42) *Ibid*.

MINNESOTA WOMEN'S CONSORTIUM

Abigail Center for Women For Women's Research, Resources & Scholarship
 Abortion Rights Council
 Abortion Rights Education & Referral
 Administrative Women in Education-Twin Cities
 AFSCME Council #14
 Agassiz Women's Political Caucus
 American Association of University Women - Minneapolis
 American Association of University Women - Minnesota (AAUW)
 American Association of University Women - St Paul
 American Business Women's Association
 Association for Children for Enforcement of Support (ACES)
 Association For Women in Computing - Twin Cities
 Association of Universalist Women
 Austin Area Women's Political Caucus
 BORN FREE
 Business & Professional Women - St Paul Chapter
 Business & Professional Women, Inc.
 Center on Women & Public Policy, HHH Institute
 CHART/WEDCO
 Child Care Works
 Children's Defense Fund - Minnesota
 Chrysalis - A Center for Women
 Chrysalis East, A Center for Women
 Church Women United in Greater Minneapolis
 Coalition of Labor Union Women - Twin Cities
 Commission on the Economic Status of Women
 Commission on the Status & Role of Women -United Methodist Church
 Concerned United Birth Parents - TC Metro Area Branch
 Continuing Education for Women - U of M
 Delta Kappa Gamma Society
 DES Action Minnesota
 DFL Feminist Caucus
 Dudley Riggs/Brave New Productions
 Education Dept - Equal Education Opportunity MN
 Executive Women Internatl-St Paul Chapter
 Face to Face Health & Counseling Service
 Faculty Advisory Committee for Women
 Family & Children's Service
 Family Service of Greater St Paul
 Family Tree Clinic
 Fizzig Comedy Company
 Genesis II for Women
 Girl Scout Council of St Croix Valley
 GOP Feminist Caucus of MN
 Gray Panthers of the Twin Cities
 Greater Minneapolis Day Care Association
 Greater Minneapolis Girl Scout Council
 Hennepin County Women's Political Caucus
 Hennepin Technical Institute Job Training
 Honeywell Women's Council
 Jobs Now Coalition
 Junior League of Minneapolis
 Junior League of St Paul
 League of Women Voters - Minneapolis
 League of Women Voters - Minnesota
 League of Women Voters - St Paul
 Les Soeurs
 Life-Work Planning Center
 Lives in Transition
 Local #879 UAW Women's Committee
 Macalester Women's Collective
 Mainstay Inc.
 Meadowbrook Women's Clinic
 Melpomene Institute for Women's Health Research
 Metropolitan State University Women's Program
 Midwest Health Center for Women
 Minneapolis Federation of Teachers #59
 Minnesota Agri-Women
 Mississippi Valley Women's Cycling Association
 MN Association for the Education of Young Children
 MN Association for Women in Housing
 MN Association of Women in Criminal Justice
 MN Catholics for a Free Choice
 MN Center Women in Government
 MN Coalition for Battered Women
 MN Coalition of Organizations for Sex Equity Education
 MN Coalition of Sexual Assault Services
 MN Conference - United Methodist Women
 MN Dental Hygienists' Association
 MN Dietetic Association
 MN Displaced Homemaker Program
 MN Education Association (MEA)
 MN Education Association - Women's Caucus
 MN Federation of Teachers
 MN Home Economics Association
 MN Nurses' Association
 MN Nurses' Association - 3rd District
 MN Pay Equity Coalition
 MN Political Congress of Black Women
 MN Society for Clinical Social Work
 MN State University System
 MN Valley Unitarian Universalist Women
 MN Women Elected Officials
 MN Women in Higher Education
 MN Women Lawyers
 MN Women of Today
 MN Women Psychologists
 MN Women's Campaign Fund
 MN Women's Education Council
 MN Women's Fund
 MN Women's History Month
 MN Women's Political Caucus
 MN Working Women/9 to 5
 MN Worldwide Women
 Multicultural Education/Sex Equity - St Paul Schools
 National Association of Women's Business Owners - MN
 National Council of Jewish Women - Greater Minneapolis
 National Council of Jewish Women - St Paul Section
 National Network of Women's Funds
 National Organization for Women - MN (NOW)
 National Organization For Women - St Paul
 National Organization for Women - Twin Cities
 New Directions Displaced Homemaker Program
 Northeast Community School
 Older Women's League of Minnesota
 Parents Anonymous of Minnesota
 PAT - Putting it all Together
 People Escaping Poverty Project
 Planned Parenthood of Minnesota
 Psyche Inc
 Ramsey Co Opportunities Industrialization Center
 Ramsey County Women's Political Caucus
 Saganis Inc
 School Age Child Care Alliance
 School Nurse Organization of Minnesota
 Sexual Violence Center
 Sigma Delta Epsilon - Graduate Women in Science
 Society of Women Engineers
 Soroptimist International of Minneapolis
 Southside Child Care Committee
 Southwest Women's Shelter
 Steering Committee - United Church of Christ Women
 Storefront/Youth Action
 The Women's Office - Sisters of BVM
 Twin Cities District Dietetic Association
 U.S. West Women - Minnesota Chapter
 University Community for Choice
 University of Minnesota - MN Women's Center
 University Women's Center - St. Cloud
 Upper Midwest Women's History Center
 Whisper Minnesota Project
 WINGS
 Women Against Military Madness
 Women Candidate Development Coalition
 Women Historians of the Midwest
 Women in City Management
 Women in Communications Inc - Twin Cities
 Women in State Employment (WISE)
 Women in the Trades
 Women in Transition
 Women's Advocates
 Women's Center - Mankato State University
 Women's Community Housing
 Women's Enrichment Center
 Women's Equity Action League (WEAL)
 Women's Health Center of Duluth
 Women's Health Leadership Trust
 Women's Intercollegiate Athletics - U of M
 Women's International League for Peace & Freedom
 Women's Issues Task Force/United Handicapped
 Federation
 Women's Network of Red River Valley
 Women's Upward Bound - Minneapolis Community College
 Working Opportunities for Women
 YWCA - Minneapolis
 YWCA - St Paul
 Zonta Club of Minneapolis
 Zonta Club of St Paul

- The Minnesota Women's Consortium sponsors discussion groups on any and all issues that the women's community wishes to explore. "Brown Bag" Legislative Lunches are held every Monday from Noon to 1:00 PM in Room 22B of the State Capitol during the Legislative Session. When the Legislature is not in session the group meets in the Minnesota Women's Building. Call 228-0338 for topic and speaker.
- "Brown Bag" Legislative Lunches are held every other Tuesday in the Hennepin County Government Center. Call 228-0338 for topic and room location.



Planned
Parenthood

of Minnesota

1965 Ford Parkway
Saint Paul, Minnesota 55116-1996
Telephone 612 698-2401

For more information, call:
Thomas P. Webber, Executive Director,
or Connie Perpich, Director of Public
Affairs, 612/698-2401

EMBARGOED UNTIL 9:00 P.M., THURS., NOV. 15

PLANNED PARENTHOOD ANNOUNCES
MAJOR PREGNANCY PREVENTION PROGRAM

St. Paul, Nov. 15 -- Planned Parenthood of Minnesota (PPM) has announced it will launch an aggressive public education and advocacy campaign in 1991 aimed at preventing unplanned pregnancies. The announcement of Prevention 1991 was made at the organization's annual meeting tonight by the newly elected president, Minneapolis resident Maureen Parkinson.

In her remarks, Parkinson said, "The public needs to be reminded of the urgent need for education and family planning services as the best real-world solution for preventing unplanned pregnancies. Prevention 1991 is designed as that wake-up call.

"Half the nation's teens between the ages of 15 and 19 are sexually active. Teen-age pregnancies cost taxpayers \$21.5 billion last year for welfare programs supporting teen-headed families. Here in Minnesota, a 1987 survey revealed that nearly half of all AFDC families began with teen-age mothers. That same year, teen-age pregnancies cost Minnesota \$503 million in medical assistance and welfare programs. These figures are unnerving and unnecessary.

"Prevention 1991 is intended to send a message about the need for understanding and prevention as a means of decreasing

(more)

2/Planned Parenthood

unintended pregnancies and as the best way to reduce the need for abortion.

"In no way does this mean that Planned Parenthood will minimize its commitment to the right of every woman to secure a safe and legal abortion. It means simply that we also see an alarming need for expanded education and prevention programs at this time.

"Details concerning the timing and implementation of Prevention 1991 will have to be worked out, but we envision such elements as:

1. Conducting a statewide advertising campaign which focuses on prevention and the availability of family planning care throughout the state.

2. Emphasizing the discussion and understanding of prevention with legislators through a variety of activities. We will aggressively seek an increase in Minnesota's financial appropriation for family planning care. We cannot point with pride to the current appropriation of only \$1 million per year for service grants when that level of commitment has remained essentially flat since 1978.

3. Expanding the platform for clergy who support family planning and prevention to participate more actively in the public dialogue. We will call upon our friends in the religious community to help us develop an effective forum for this discussion.

4. Conducting grass-roots round table discussions in

(more)

3/Planned Parenthood

communities around the state to address factors contributing to unintended pregnancies and the availability and funding of pregnancy prevention programs.

5. Inaugurating an ongoing forum sponsored by Planned Parenthood of Minnesota for public policy and family planning professionals to discuss long-range strategies and solutions for preventing and reducing unwanted pregnancies.

6. Working with other organizations to strengthen speakers' bureaus statewide on the need for all women, but especially low-income and teen-age women, to have access to effective birth control.

"The mission of Planned Parenthood of Minnesota when it was founded nearly 63 years ago was to enable couples to have children if and when they so desired, and that remains our mission today. Nearly 95% of all our patients come to us for birth control services.

"We would like to invite other organizations, including those opposed to abortion, to join with us in our efforts. If we can work together to prevent unplanned pregnancies, we can significantly reduce the need for abortions and ensure that every child is a wanted child."

Planned Parenthood of Minnesota is the state's oldest and largest provider of reproductive health care services. PPM operates 26 clinics in Minnesota and South Dakota, annually serving nearly 65,000 Minnesotans through medical, educational and training programs.

Star Tribune

Established 1867

Roger Parkinson Publisher and President

Joel R. Kramer Executive Editor

Tim J. McGuire Managing Editor

Robert J. White Editorial Editor

18A

Friday/January 25/1991

Get agreement on pregnancy prevention

The 18th anniversary of the Supreme Court decision legalizing abortion was marked by familiar antiabortion marches and speeches, by the usual abortion-rights counterpoint. The battle need not go on this way forever, however. In Minnesota, conditions are ripe for something better.

For a new prochoice governor and the revived abortion-rights movement, the task is to break down legal and financial obstacles to abortion that have been thrown in the way of women, especially the young and the poor. But Gov. Arne Carlson and his allies also must reach across the abortion divide to recruit support for a far-reaching plan to combat the unplanned pregnancies that make abortion necessary.

The most notorious target for early repair is Minnesota's law requiring that pregnant minors notify both parents, regardless of the family's situation, before obtaining an abortion. A compassionate modification would allow minors to satisfy the notification requirement by consulting with any "trusted adult," such as a relative or doctor. Another target for reform was identified by Gov. Rudy Perpich, an abortion opponent, in the last months of his term: the state's refusal to help poor

women pay for abortions. The job of correcting that unfairness falls to Carlson.

Those changes are sure to anger many abortion opponents; some prefer to counterattack with further restrictions, as in Utah. But both sides should agree on the importance of preventing unplanned pregnancies, particularly among teenagers, which so often result in abortion. The need is to improve and extend sex education in schools, to provide birth control through school health clinics statewide and to put more money into family planning.

Unfortunately, sex education and birth control also are fodder for tired disputes over whether they encourage promiscuity. High teen-pregnancy and abortion rates are grim testimony that not enough is being done to educate young people about sexual responsibility. Nor is the state doing enough when its family-planning spending has remained at just over \$1 million a year for more than a decade. There is no better antidote to abortion than prevention of unwanted pregnancies. There can be no prevention without education and access to birth control. Prevention should be the bridge that brings together good people from both sides of the abortion divide.

MNA CLIPPING SERVICE

HOUSTON GAZETTE
& COUNTRY JOURNAL
Houston Co.

NOV 29 1990

Planned parenthood announces major pregnancy prevention program

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In her remarks, Parkinson said, "The public needs to be reminded of the urgent need for education and family planning services as the best real-world solution for preventing unplanned pregnancies. Prevention 1991 is designed as that wake-up call.

"Half the nation's teens between the ages of 15 and 19 are sexually active. Teen-age pregnancies cost taxpayers \$21.5 billion last year for welfare programs supporting teen-headed families. Here in Minnesota, a 1987 survey revealed that nearly half of all AFDC families began with teen-age mothers. That same year, teen-age pregnancies cost Minnesota \$503 million in medical assistance and welfare programs. These figures are unnerving and unnecessary.

"Prevention 1991 is intended to send a message about the need for understanding and prevention as a means of decreasing unintended pregnancies and as the best way to reduce the need for abortion.

"In no way does this mean that Planned Parenthood will minimize its

commitment to the right of every woman to secure a safe and legal abortion. It means simply that we also see an alarming need for expanded education and prevention programs at this time.

"Details concerning the timing and implementation of Prevention 1991 will have to be worked out, but we envision such elements as:

1) Conducting statewide advertising campaign which focuses on prevention and the availability of family planning care throughout the state.

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3) Expanding the platform for clergy who support family planning and prevention to participate more actively in the public dialogue. We will call upon our friends in the religious community to help us develop an effective forum for this discussion.

4) Conducting grass-roots round table discussions in communities around the state to address factors contributing to unintended pregnancies and the availability and funding of pregnancy prevention programs.

5) Inaugurating an ongoing forum sponsored by Planned Parenthood of Minnesota for public policy and family planning professionals to discuss long-range strategies and solutions for preventing and reducing unwanted pregnancies.

6) Working with other organizations to strengthen speakers' bureaus statewide on the need for all women, but especially low-income and teen-age women, to have access to effective birth control.

"The mission of Planned Parenthood of Minnesota when it was founded nearly 63 years ago was to enable couples to have children if and when they so desired, and that remains our mission today. Nearly 95% of all our patients come to us for birth control services.

"We would like to invite other organizations, including those opposed to abortion, to join with us in our efforts. If we can work together to prevent unplanned pregnancies, we can significantly reduce the need for abortions and ensure that every child is a wanted child."

Planned Parenthood of Minnesota is the state's oldest and largest provider of reproductive health care services. PPM operates 26 clinics in Minnesota and South Dakota, annually serving nearly 65,000 Minnesotans through medical, educational and training programs.

OSSEO-MAPLE
GROVE PRESS
Hennepin Co.

54 Planned Parenthood launches pregnancy prevention program

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WOMEN'S LEGAL DEFENSE FUND

SCHOOL-BASED CLINICS
AND PREVENTION OF ADOLESCENT PREGNANCY

EXECUTIVE SUMMARY

Facts and Figures on Teen Pregnancy

- * Each year more than one million teenage girls in the United States become pregnant.
- * Seventy-five percent of teen pregnancies occur to teens who do not use contraceptives.
- * Patterns of sexual activity among teens in most developed countries are comparable, but the teen pregnancy rate in the U.S. is considerably higher.

The Risks and Consequences of Teen Childbearing

- * Teens have higher rates of pregnancy-related complications and are at greater risk of having premature and/or low birthweight babies (weighing under 5-1/2 pounds). Although these health risks can be reduced significantly with proper prenatal care, only 53 percent of teen mothers in the United States receive early prenatal care.
- * Teen mothers are disproportionately poor and dependent on public assistance.
- * Teen parents, on average, complete fewer years of school and earn less than men and women who delay childbearing until their 20s.

Goals Set By the National Research Council

- * The Panel on Adolescent Pregnancy and Childbearing of the National Research Council concluded in 1987 that the major strategy for reducing unintended teen pregnancies must be the encouragement of diligent contraceptive use by all sexually active teens. The Panel endorsed school-based clinics as a "promising intervention" for preventing teen pregnancies.

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202 486-2600
Fax 202 486-2530

Support For School-Based Clinics

* The U.S. Department of Health & Human Services and many research, educational and public health organizations have issued statements supportive of school-based clinics.

A Profile of School-Based Clinics

* Now in at least 33 states, school-based clinics provide comprehensive care to adolescents. By placing clinics in the school, the logistical and financial barriers that impede minors' access to health care are lifted.

* Nearly all clinics provide some type of family planning services. Approximately 10 to 25 percent of visits to school-based clinics are for reproductive health care, with the overwhelming majority of visits for other health reasons.

* Studies of school-based clinics show that carefully designed programs can result in delays in initiation of sexual activity, increases in effective use of contraceptives among sexually active teens and decreases in pregnancy rates.

State Initiatives on School-Based Clinics

* Recent state-level activity on school-based clinics has included a variety of initiatives: enacting laws to study health services provided in schools (Maine, Wisconsin and California); setting up councils to develop model programs (Massachusetts, Rhode Island); providing authority and funding for demonstration or small-scale projects (Oregon, Iowa, Wisconsin); and providing authority and funding for major state-wide programs (Michigan, Florida, New Jersey, New York, Kentucky).

Prepared by Joanne L. Husted
January 1991



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6/21/91

RESOLUTION #1

REPRODUCTIVE HEALTH

- Whereas: individual state legislatures are hurriedly introducing the most restrictive anti-choice legislation that bans abortions except to save the life of the mother, or in the case of rape or incest, and sends physicians to jail for performing the abortion. (More than 200 bills restricting the right to abortion have been introduced in 45 legislatures this session.);
- Whereas: Louisiana, Utah, Pennsylvania, and Guam have all enacted restrictive legislation providing a strong potential challenge to the 1973 Supreme Court decision, *Roe v. Wade*, that legalized abortion;
- Whereas: increasingly all women's rights to abortior are being whittled away, first poor women's, next young women;
- Whereas: RU-486, the "new" French pill which induces abortion, was tested only on consenting white, middle-class women and assumes an availability of services that is not available for women of color and poor women in this country;
- Whereas: African-American women are 3 times as likely to rely on Medicaid or other government programs as a source of family planning and obstetric care and Congress has required states to increase Medicaid coverage for pre-natal care and services to children while the proportion of pediatricians willing to treat Medicaid patients is declining, effectively limiting the access of poor women and children to medical treatment;
- Whereas: fibroids and cervical cancer are more common in African-American women and sterilization by hysterectomy is so common among African-American women in the South that it is referred to as "a Mississippi appendectomy";

Whereas: women of color, the majority of whom are African-American, constitute over 30% of Title X patients using family planning clinics that are funded totally or in part by the federal government;

Whereas: Title X clinics are frequently their only sources of health care providing preventative services that include pelvic and breast examinations, cancer screening, testing for sexually transmitted diseases and education about all methods of contraception;

Whereas: the Supreme Court's decision on Rust v. Sullivan ("gag rule") denies these women crucial information regarding their medical condition and effectively mandates many African-American women to either bear children (whether or not they are wanted) or to seek back alley abortions;

Whereas: the Rust v. Sullivan decision re-establishes separate and unequal justice in America - quality health care for those who can afford it; second class care for those who cannot;

Whereas: as with the Hyde Amendment, which prohibits the use of federal funds for poor women's abortions, women of color and low-income women have been denied the right of choice in their lives and are forced to bear the brunt of these decisions which limit the options and possibilities for improving the quality of their life;

We resolve that the National Black Women's Health Project commits its resources and energies and directs its members, chapters, and self-help groups, both national and international, to commit their energies and resources for the next 3 years to overturn the "gag rule" and work to secure the right to reproductive choice and self-determination for all African-American women.



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6/21/91

RESOLUTION #2

WOMEN AND HIV/AIDS

Whereas: African-American women are suffering from AIDS at a rate far in disproportion to their numbers in the population. (Although African-American and Hispanic females constitute 19% of all women in the United States, they represent 72% of all U.S. women diagnosed with AIDS.);

Whereas: 52% of all women with AIDS are African-American and 80% of pediatric AIDS cases are babies born to women of color;

Whereas: The Centers for Disease Control Surveillance Definition of AIDS excludes a considerable number of people who clearly have AIDS - particularly women and intravenous drug users, the fastest growing populations with AIDS;

Whereas: the current outdated definition:

- * leaves many individuals and health care providers uninformed, tragically affecting education, prevention, diagnoses and treatment;
- * undercounts the total number of cases and distorts the epidemiology vital to providing health care, investigating treatments and determining funding levels;
- * restricts access to treatment, services, benefits, trials and housing services so many public and private agencies rely on the CDC definition;
- * improperly allocates funds as certain affected populations are more undercounted than others;

Be it resolved that the National Black Women's Health Project commits its resources and energies and directs its members, chapters, and self-help groups, both national and international, to commit their resources and energies to address critical issues regarding African-American women and HIV/AIDS.



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6/21/91

RESOLUTION #3

NESTLE INC./CARNATION INFANT FORMULA MONITORING CAMPAIGN

Whereas: The World Health Organization (WHO) Code of Marketing of Breast Milk Substitutes states: "There should be no advertising or other form of promotion to the general public of products within the scope of this code.";

Whereas: Nestles Inc. (and its subsidiary, Carnation) executives agreed to follow the Code in all countries when the agreement to end the first boycott was signed and now claims that the Code does not apply in the United States;

Whereas: The United States is currently facing the highest infant mortality rate of all industrialized nations with 40,000 babies dying before their first birthday each year and infants of color are disproportionately represented in this group;

Whereas: poor, uneducated women are now being subjected to Nestle Inc.'s marketing campaigns without adequate information on the superiority of breast feeding, the negative effect of partial bottle feeding, the difficulty of reverting back to breast feeding and the financial implications and health hazards of unnecessary and improper use of infant formula and other breast milk substitutes;

Be it resolved that the National Black Women's Health Project will commit its resources and energies and direct its membership, chapters, and self-help groups, both national and international, to commit its resources and energies to closely monitor and publicize these activities and demand that Nestle reverse this marketing strategy.

REPRODUCTIVE RIGHTS FOR A MORE HUMANE WORLD

Anatomists tell us that it takes forty-three muscles to frown but only seventeen to smile. Tonight, we have something to smile about because we are adding Faye Wattleton's name to the list of names of feminine recipients of the Humanist of the Year Award: Margaret Sanger, Mary Calderone, Betty Friedan, Maggie Kuhn, and Helen Caldicott.

Faye Wattleton was born in St. Louis, Missouri, on July 8, 1943, which makes her the youngest person ever to receive the Humanist of the Year Award. She was reared by fundamentalist parents who believed in community service. This background helped to shape her decision to enter the nursing profession and, later, to become actively involved with family planning.

Faye graduated from high school at the age of sixteen. She worked her way through Ohio State University Nursing School. At that time, birth control and family planning issues were of no concern to her as she concentrated on her goal to become the first member of her family to earn a college degree. After graduating in 1964, she taught maternity nursing for two years in Dayton, Ohio. It was there that Faye first encountered and treated women who had had life-threatening abortions.

In 1966, she enrolled in Columbia University in New York, where she earned a master's degree in maternal, infant, and health care and a certificate in nurse-midwifery. During her internship at a Harlem hospital, she became keenly aware of the great need for birth control and for life-saving abortions. Faye became a Planned Parenthood volunteer.

In 1971, Faye was selected to be executive director of Planned Parenthood in Dayton. She exhibited remarkable leadership, tripling the number of clients and increasing the budget from \$400,000 to \$1 million. She dramatically reaffirmed our motto, "Every Child a Wanted Child," when her well-planned daughter, Felicia, was born. Faye also dramatically refuted the antichoice critics who alleged that Planned Parenthood opposed childbirth and child care. After a short maternity leave, Faye returned, bringing her daughter to work every day, where Felicia attended all office, staff, and board meetings. No child ever had so many loving surrogate mothers!

In 1978, Faye was chosen to be president of the Planned Parenthood Federation of America, marking a departure from the succession of white, middle-aged, male executives. The first time I saw Faye at the national Planned Parenthood convention in 1978 in New York City, I was struck by her elegance, her charisma, and her skill as an accomplished speaker. Faye has improved immeasurably the public image of Planned Parenthood.

Founded in 1916 by Margaret Sanger, Planned Parenthood is the nation's oldest and most respected family planning organization. It serves more than three million clients a year and is also a founding member and the largest contributing member of International Family Planning. As president of the Planned Parenthood Federation of America, Faye is also in charge of a large international program which reaches 120 countries.

The most important function of Planned Parenthood is to educate. The task is gargantuan. Planned Parenthood has a favorite slogan, "Think education is expensive? Price ignorance!" Ignorance regarding human reproduction is worldwide. The overwhelming numbers of teenage pregnancies are stark evidence. But Planned Parenthood's educational program is becoming more successful under Faye Wattleton's leadership.

Increasing overpopulation, according to Dr. Stephen Mumford, is the single, most elemental, universal problem facing humans today. Faye, as leader of Planned Parenthood, is actively confronting that problem. She is dedicated to the proposition that women have the right to reproductive freedom, she exudes optimism, and she is confident that her efforts will prevail. The heart of every humanist, Faye, beats in applause to you for your commitment, your optimism, and your confidence.

—Barbara Tabler, from her remarks introducing Faye Wattleton, 1986 Humanist of the Year, at the Forty-Fifth Annual AHA Conference

The 1986 Humanist of the Year on the continuing challenges for reproductive freedom

FAYE WATTLETON

I am truly honored to receive the Humanist of the Year Award. It means that I have one more thing in common with a woman who was a sister nurse and the first leader of Planned Parenthood—Margaret Sanger, the founder of the family planning movement in this country and the recipient of the Humanist of the Year Award in 1957.

In her acceptance remarks, Mrs. Sanger said:

I have discovered—indeed, I have always known—that it is not enough just to know one great truth. Truth must be lived—not merely passively accepted. Truth must be lived, even though your truth makes you a minority of one.

Margaret Sanger, we know, never was a minority of one. Her great truth—that every child should be a wanted child—has been accepted and adopted by many millions the world over. It is deeply gratifying to share with her, twenty-nine years later, the distinction of receiving the Humanist of the Year Award.

Another reason I am so honored today is because your movement and mine have a great deal in common. There are a number of similarities in our goals. We share a deep respect for reason and for realism, for human life and for human rights. As a result, there are similarities in those who oppose us. In fact, there's probably a great deal of controversy over which of our organizations Jerry Falwell would like to abolish first.

And speaking of Jerry Falwell, it is a pleasure, I must admit, to share with you opposition to him and others of his ilk—those who are opposed to what we consider fundamental needs and fundamental rights for all individuals on this earth—those who would impose upon us all their bigoted views, their moralistic codes, and their inhumane policies.

The thrust of their attacks is to destroy the delicate balance we have achieved in this country between church and state and to destroy the principles, strengthened over the past two hundred years, of tolerance, justice, and individual freedom. They are the apostles of ignorance. They represent the kind of fanaticism that once caused people to hang witches and to burn books. They are, as Abraham Lincoln described them, "people who believe the realm of truth always lies within their own vision."

We are thus confronted by a political force that is waging an all-out war against civil and human rights and is giving sanctimonious support for the historic patterns of sex and race discrimination. This is a vigorous movement determined to destroy much of what we have achieved in regard to just laws and humane national policies. As a result, in 1984, the head of the Episcopal Diocese of New York, Bishop Paul Moore, Jr., said, "I see a nation ceasing to be compassionate, ceasing to use its mind in considering the issues before it."

And nowhere is a lack of compassion more apparent than in the controversy over reproductive rights. In the name of morality and religion, these

extremists have taken it upon themselves to return us to the days when the poor were expected to practice *self-control* while the rich practiced *birth-control*—or they were encouraged not to, in order to propagate a superior race.

In the name of morality, these extremists also have made clear their full agenda: to ban not only abortion but also sexuality education and contraception—the only means to *prevent* abortion. Again, in the name of morality, their first line of offense is against those with the least defense—the weakest and poorest of us all, both here and abroad.

America's children are one of their targets. The United States already leads all other developed countries in rates of teenage pregnancy, abortion, and childbirth. If the extremists have their way, it will get even worse.

The threat of teenage pregnancy hits home the hardest if you have children and particularly if you have a daughter. My daughter is ten, and, like other ten-year-olds, she has got the world on a string. My solace in confronting her sexual maturation is the knowledge that she attends an all-girl school. And that's exactly where I intend to keep her for as long as I can.

We have a teen pregnancy epidemic in this country: 1.2 million teenage girls become pregnant every year, and half a million decide to have their babies. The consequences are staggering. Their health is endangered because they are physically immature. And their future is endangered. Teenage mothers and their children are seven times more likely to be poor than other families. Saddest of all, this tragedy is compounded with each new generation. The younger the mother, the more likely that she had a teenage parent.

This is a problem none of us can ignore, even for purely selfish reasons. It's literally costing us a fortune! In 1985 alone, health and welfare programs for teenagers and their children cost the government—the taxpayer—more than \$16.65 billion.

The media have begun to pay attention to this problem. But the attention is focused almost entirely upon the black community. There is no denying that the consequences of teen pregnancy and childbearing disproportionately affect blacks, but it's because blacks are more likely to be disenfranchised.

The reality is that the pregnancy rate among black teenagers is leveling off, while the rate for white teens continues to increase. Clearly, the problem is symptomatic of a larger failing—one that needs to be addressed by the larger society.

And what is that larger society doing? Where is the national commitment to reduce teen pregnancy? What will guide our children away from the destructive landmine of teenage pregnancy which is guaranteed to leave them disabled for the rest of their lives?

Our children need a good basic education, a foundation upon which they can grow. The Reagan administration, though, is opposed to the programs which in the past two decades have given so many children the hope for real opportunities. The Reagan administration does not care much whether or not our children *learn* in school, so long as they *pray* in school.

Our children need food and clothes and medical care and a decent place to live. President Reagan, however, says people sleep on sidewalks by choice. And Attorney General Meese says people go to soup kitchens because soup is free and it's easier than paying for it.

As a result of this mean-spirited, counterproductive mentality, we saw cuts this past year in virtually every program designed to protect the health and welfare of America's children. For example, while the appropriations for

the Defense Department in 1985 reached \$295 billion, the budget for all federal family planning programs—both domestic and international—was \$622 million, a mere two-tenths of one percent of the defense budget. And for the two hundred dollars they spend on a toilet seat, a young woman could buy a year-and-a-half-long supply of birth control services.

Another aspect of the problem is the role played by society's inability to deal with sex and sexuality. Young people see and hear messages that say "do it" everywhere they turn. Yet, at the same time, they're warned not to do it. It's no wonder they're confused. Too many of us are focused upon stopping teenage sexual activity rather than stopping teenage pregnancy.

Parents have to be helped to answer their children's questions comfortably and to pass on their family's values. And, because many parents just can't do that, sexuality education must be a fundamental part of the school curricula from kindergarten through twelfth grade in every school district in the country.

We must also focus upon the mass media, particularly television. By the time teenagers graduate from high school, they've spent more hours in front of the television set than in the classroom! But, when do they see responsible representations of sexual decisions? And when do they hear about contraception—the dreaded "C-word"?

Easier access to contraception must be another priority—access without any barriers. We must establish many more school-based health clinics that provide contraceptives as part of general health care. There are only about forty of these clinics now, but they work in reducing pregnancy rates and school drop-out rates.



While the appropriations for the Defense Department in 1985 reached \$295 billion, the budget for all federal family planning programs was \$622 million, a mere two-tenths of one percent of the defense budget.

President Reagan has consistently opposed federal funding for contraceptive programs. His opposition even extends overseas to the developing world, where the most impoverished peoples on the globe are suffering the misery and desolation that result from rapid population growth.

I recently visited Southeast Asia and Africa, where I saw a growing mirror image of what is happening in this country. I saw the breakup of extended families because of mobility—people move to the cities seeking opportunities and find none—generating a sense of frustration, anger, and hopelessness. I saw the creation of a subculture of society that will certainly challenge the resources of developing countries struggling to build a better life for their citizens. At the same time, increases in the rates of pregnancy and childbearing among young unmarried people are beginning to emerge in the developing world.

It is encouraging that, since the late 1960s, more than one hundred countries have instituted national family planning programs, encompassing 94 percent of the developing world. And, in some countries, the success has been amazing. In Thailand, for instance, in less than two decades, the annual population growth rate was re-

duced from over 3 percent to less than 1.9 percent.

But we face a terrible irony. Just when so much of the world has come to accept family planning—espoused by the United States government for more than twenty years—the U.S. government has completely reversed itself.

Now, says our administration, population growth is *not* a significant factor in the world's development problems. Now, says our administration, free enterprise is the panacea. Our leaders point to countries like Singapore and South Korea as shining examples of how a growth in capitalism results in population declines. But they fail to mention that, at the same time these countries invested in economic programs, they also invested in family planning programs.

So, why the preference for blind rhetoric over fact? Why the decision to eliminate U.S. funding for international family planning agencies that serve 81 percent of the developing world's population, excluding China—agencies that use their own private funds for abortion-related activities?

The answer has nothing to do with the use of federal funds for abortion. Since 1974, the law has pre-

CONTINUED ON PAGE 30

LEARN THE WHOLE STORY!

"Scientific" creationists are abandoning the Paluxy River footprints. Here's why:

The latest issue of *Creation/Evolution*, the only journal devoted to answering the arguments of "scientific" creationists, tells the exciting story of how leading creationists finally were made to realize that some of their conclusions were in error.

Until recently, creationists had claimed that human and dinosaur footprints could be found side by side along the Paluxy River in Texas. But in the light of a devastating analysis of the evidence by AHA-financed researchers, published this past summer in *Creation/Evolution*, and extensive work done by independent researcher Glen Kuban, leading creationists took a second look at their own evidence and began to retract some of their claims.

In this latest issue of *Creation/Evolution* (number 17), Glen Kuban explains the facts that convinced creationists they were wrong. Dr. Ronnie Hastings tells how the change of heart came about. And Robert Schadewald shows how much more retracting the creationists have yet to do!

Order your copy today for \$2.75 or subscribe for \$9.00 (four issues). Contact:

CREATION/EVOLUTION

7 Harwood Drive, P.O. Box 146, Amherst, NY 14226-0146, (716) 839-5080

REPRODUCTIVE RIGHTS

CONTINUED FROM PAGE 7

vented that, and no violations have ever been found. The answer, instead, has to do with appeasing the radical extremists who callously ignore Americans' fundamental rights and the world's fundamental needs.

That callousness is most obvious in the domestic abortion controversy. The extremists' long-term goal is to ban abortion nationwide. But they fail—time and again—in the courts, in Congress, and—most importantly—in the hearts and minds of the people. In their frustration, however, extremists have resorted to scare tactics designed to frighten us into surrendering our civil rights and our constitutional right to privacy.

The terrorism we see overseas is

matched by terrorism right here at home. Since January 1985, family planning and abortion clinics have been subjected to more than twenty-five incidents of actual or attempted bombings and arson. And they have escalated to the level of direct attempts to commit murder. Yet President Reagan, the man who swore to uphold the Constitution of the United States, is reported to have discussed pardons for abortion clinic bombers.

Clearly, the flames of fanaticism have not been extinguished in this country. One man who helped bomb three clinics on Christmas day in 1984 said that his actions were "a gift to baby Jesus on his birthday." Clinic violence and harassment are the direct descendants of the religious discrimination that once was as common as powdered wigs in Colonial America.

We have come too far to return to those days. It is true that tolerance taxes our patience and strains our sense of fairness. But, accommodating differences was never meant to be easy. Those who think it's too diffi-

cult, those who think the rest of us should be protected from ourselves, be comforted by the words of Thomas Jefferson:

I know of no safe repository of the ultimate powers of society but the people themselves; and if we think them not enlightened enough to exercise their control with a wholesome discretion, the remedy is not to take it from them but to inform their discretion by education.

We must trust the people. We must trust each other. We must recognize that private morality should be taught in the home and preached from the pulpit, but it must *never* be legislated by politicians. We must protect our own basic rights by protecting those of others. Most importantly, we must never be so convinced of the rightness of our position that we blind ourselves to the possibility that the realm of truth may lie in another person's vision.

The legendary jurist Learned Hand, in the dark days of World War II, made an observation that will hold true until the end of time. He said, "The spirit of liberty is the spirit that's not too sure it's right."

With such a philosophy, we can preserve the principles of justice, pluralism, and democracy that are cherished by so many millions on planet Earth. We can continue our heroic journey toward full freedom of thought and expression for all. And we can look forward to the day when tolerance, reason, and justice will be the bedrock of our churches, our courts, and our Congress.

In 1957, when Margaret Sanger received her Humanist of the Year Award, she said that reproductive rights "should be the humanist spearhead in the endless battle against entrenched complacency, against mass conformity, against the glacierlike menace of prejudice." Today, in 1986, I do not ask that you adopt reproductive rights as your spearhead. I ask only that you help preserve those rights in your continuing struggle to preserve the humanity of our world. ■

Bill attempts to check abortion funding cuts

By MATT KOHLMAN
ASSOCIATED PRESS

JUNEAU — Legislation designed to prevent government interference with a woman's right to an abortion has been introduced in reaction to fears the Hickey administration will try to restrict abortion funding.

Legislators are worried that Dr. Ted Mala, health and social services commissioner, might try to restrict the use of state welfare money to provide abortions for poor women, Rep. Niilo Koponen said Thursday.

Speaking this week before a House committee, Mala said he would soon present a list of options to Gov. Walter J. Hickel for dealing with the abortion issue.

"It did seem to be clear that when the Legislature leaves, the administration was going to do a great deal by regulation and executive order," said Koponen, D-Fairbanks.

"Outlawing abortion is a law that can be only enforced against women. If we allow abortions and then prohibit it against poor women, then we would be further discriminating against women not only on sex but on wealth."

But Mala said it was all speculation until the governor makes a decision. "No policy decision has been made," he said. "We're just weighing this action."

He also said it was "silly" to believe the department had a hidden agenda it would pursue once the Legislature adjourned. "It's not as if the Legisla-

tion is going away and never coming back."

Koponen said the Reproductive Privacy Act would allow the Department of Health and Social Services to adopt abortion regulations only if they do not delay, increase the cost of or limit the availability of an abortion.

Also, the department would pay for abortion procedures as permitted under federal law.

Koponen and 30 co-sponsors introduced House Bill 268 Wednesday. Identical legislation is expected to be submitted Friday by Sen. Bettye Fairrenkamp, D-Fairbanks.

The bill is modeled after an Iowa law. Iowa is one of six states with such a law, Koponen said.

"Reproductive privacy, including abortion, is a matter of individual conscience, not governmental coercion," Koponen said in a sponsor statement. "Reproductive choices of Alaskans must be protected by law."

Hickel spokesman John Manly said Hickel, a Catholic, opposes the legislation.

"His position on abortion is very well known," Manly said.

Mala said the legislation amounts to a mandate that the state pay for abortions. The state paid about \$370,000 to C&S women for abortions during fiscal 1990.

Mala said the state has the option of paying for abortions for those people who meet Medicaid eligibility guidelines. He said the federal government has elected not to pay for abortions for poor women.

LEGISLATIVE CALENDAR

* * * * *

<p>Senate</p> <p>Finance</p> <p>Today, 9 a.m.: Finance Rules 111 Subcommittee reports to the full committee.</p> <p>Health, Education & Social Services</p> <p>Today, 8 a.m.: Buharich Room 206 SB 179 Teen Pregnancy Prevention; SB 173 Peer Counseling Project; Teen Health; SB 174 State Aid for School Health Clinics; SB 175 Teen Health Care Services; SB 176 Health Education Program; SCR 13 Teen Focus by Children's Youth Commission; SCR 14 Research Report on Teen Pregnancy, Transportation & Public Facilities Finance Subcommittee</p> <p>Senate Finance 3M</p> <p>April 11, 10 a.m. to 4 p.m. Statewide teleconference for confirmation of public employees.</p> <p>Labor & Commerce</p> <p>Today, 1:30 p.m.: 6022 Room 111 SB 4 Establish Alaska Gaming Commission; SB 6 Multiple Permittee Company, Price Adjustment SB 162 Allow Off-Track Parimutuel Wagering SB 207 Game of Chance, Licensed Operators.</p> <p>Resources</p> <p>Today, 1:30 p.m.: Buharich Room 205</p>	<p>SB 119 Delta Clearwater Special Use Areas (Previously heard, Natural Resources)</p> <p>Today, 10 a.m.: Finance 111 Department of Natural Resources Board Closed.</p> <p>Oil Spill Committee</p> <p>Today, 10 a.m., Capitol Room 17 Testimony by Federal representatives (Continued).</p> <p>Health</p> <p>Finance</p> <p>Today, 1:30 p.m.: Finance Room 119 SB 37 State Fisheries Land Grant; Section 408 SB 400: Acquisition of State Park Timber Rights; SB 134 Affiliability of VET land Disposal; SB 143 Municipal Land Grant Auctions (Pending Vote); SB 116 Alaska Voluntary Disposal Rights; SB 300 Anchorage Coastal Wildlife Refuge.</p> <p>Judiciary</p> <p>Today, 1:30 p.m.: Court Room 100 1184 Legislative Ethics Act, Draft Held from April 8.</p> <p>State Affairs</p> <p>Today, 8 a.m.: Capitol Room 100 HB 11 Jurisdiction of District Court; SB 224 Assignment of Right to Permanent Fund Dividend; SCR 21 Kodiak Island; Environmental Community Planning Report; State Priority Hold.</p>
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Senate ponders funding bone-marrow donor drive

TIMES CAPITAL BUREAU
JUNEAU — Senators will today consider a measure appropriating \$222,000 to the department of Health and Social Services to finance a bone-marrow donor drive.

The bill would pay for a grant to the Blood Bank of Alaska Inc. to finance the drive.

The bill would pay for a grant to the Blood Bank of Alaska Inc. to finance the drive. The Senate meets at 11 a.m. Senators will also consider a bill relating to loans for half-time students and repealing the student financial aid committee.

Two resolutions are up in the House, which meets at 10 a.m. today. One would create a special committee to identify social and health barriers in education. The other asks President Bush to ratify international standards of training, certification and watchkeeping for seafarers.

Representatives are set to consider a bill that allows judicial officers to send search warrants by facsimile machines to remote locations in Alaska. The

The Senate will also take up a resolution supporting Anchorage's bid to host the 1994 World Trade Centers Association General Assembly and International trade show.

House will also consider a measure changing the timing of the state's compilation of potential jury lists.

Cole offers to donate oil interests to Boy Scouts

TIMES STAFF
Attorney General Charlie Cole says he will donate his fractional interests in three North Slope oil fields to Fairbanks-area Boy Scouts.

"If these lease interests have any value, I would like the Boy Scouts to have them," said Cole, a former Eagle scout who has made financial contributions before to the Midnight Sun Council in his hometown.

Cole reported fractional inter-

ests in three North Slope oil leases and two in Cook Inlet on his conflict-of-interest report to the Alaska Public Offices Commission, the state's political watchdog agency.

ARCO Alaska Inc. is a majority holder in the North Slope leases; Exxon owns a quarter of one percent of one of them.

He said he hopes the donation will "immunize" him from any conflict of interest with major oil companies.

Cole's oil lease interests represent fractions of 1 percent. None of the leases is producing oil and Cole said he does not expect them to while he is attorney general. He said he has received no money from them.

Cole recently helped negotiate the \$1.1 billion Exxon Valdez oil spill settlement.

He said he plans to retain his interests in the Cook Inlet leases of Stewart Petroleum Co. "It's not any oil company with which the state has major litigation,"

Cole said. Mike Johns, scout executive for Midnight Sun, called the donation "unusual" but said the council's board would consider it.

"We get a variety of donations from time to time," Johns said. "I don't know if we've ever received an oil lease before. We might turn down a donation that had no benefit for boy scouts."

Johns said the council has about 1,900 scouts in communities north of the Alaska Range.

S B

2 6 4

FISCAL NOTE

STATE OF ALASKA
1992 LEGISLATIVE SESSION

BILL NO. SB 264

Revision Date: _____

Department Affected: Education

Title: An Act relating to the ratio of students to teachers in public schools.

BRU: Educational Program Support

Component: Data Management

Sponsor: Senator Rodev

Requestor: (S) HESS

COMPONENT SERIAL NO.

1	2	4	1
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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 93	FY 94	FY 95	FY 96	FY 97	FY 98
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	0	0	0	0	0	0

CAPITAL						
---------	--	--	--	--	--	--

REVENUE						
FUND SOURCE:						

FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER						
FUND SOURCE:						
TOTAL	0	0	0	0	0	0

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: _____

ANALYSIS: (Attach a separate page if necessary.)

School District Costs

Although the impact of SB 264 to the Department of Education is zero, the school districts will incur increased costs associated with the new reporting requirements as well as those associated with formulating a plan for reduction of student teacher ratios.

Prepared by: Bob Silverman

Phone: 465-2806

Division: Educational Program Support

Date: 3-11-92

Approved by Commissioner: *M. A. Mahon*

Jerry Covey

Agency: Education

Date: 3-11-92

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. SB 264

Revision Date: _____ Department Affected: Education
 Title: Ratio of students to teachers BRU: K-12 Support
in public schools Component: Foundation
 Sponsor: Rodey
 Requestor: Rodey COMPONENT SERIAL NO.

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Expenditures/Revenues: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL						
---------	--	--	--	--	--	--

REVENUE						
---------	--	--	--	--	--	--

FUNDING: (Thousands of Dollars)

GENERAL FUND	-0-	-0-	-0-	-0-	-0-	-0-
FEDERAL FUNDS						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME						
PART-TIME						
TEMPORARY						

Estimate of current year impact: None

ANALYSIS: (Attach a separate page if necessary.)

Although the impact of SB 264 to the state is zero, it will increase the cost to school districts of compliance with the new reporting and evaluation functions in SB 264.

Prepared By: Mary Hakala Phone: 465-2800
 Division: Commissioner's Office Date: 5/2/91
 Approved by Commissioner: Steve Hole, Acting Commissioner
 Agency: Education Date: 5/2/91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, CMB, & Impacted Agency(ies).

Patrick M. Rodey
Senator

Alaska State Legislature



Senate

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SPONSOR SUMMARY - Senate Bill 264

Senate Bill 264, relating to the ratio of students to teachers in public schools, seeks to positively impact academic performance and classroom discipline by encouraging the reduction of the number of students in each classroom, and to maintain economy, efficiency, and academic achievement in schools.

This bill amends AS 14.03.120 (a) by adding an item to the reporting requirements which would report a district's ratio of students to teachers in grades K-12. It further states that should the ratio be greater than 20 to 1, the district include a plan for reducing the ratio. That plan must identify the causes for high ratios, including any problems unique to that district.

SB 264 also amends AS 14.03.120 (e) by adding language that calls for the inclusion in the "School District Report Card to The Public" of the effect of the student/teacher ratio on each school's performance.

The bill carries a zero fiscal note for the Department of Education, but will increase evaluation and reporting costs to school districts in order to maintain their compliance with existing reporting requirements.

*Assured like
input from
classroom teacher
if more than 20
space addressed?
aide?*

SENATE BILL NO. 264

IN THE LEGISLATURE OF THE STATE OF ALASKA

SEVENTEENTH LEGISLATURE - FIRST SESSION

BY SENATOR RODEY

Introduced: 4/24/92
Referred: HES, Judiciary, Finance

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to the ratio of students to teachers in public schools."

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

3 * Section 1. FINDING AND INTENT. The legislature finds that placing students in a smaller class
4 has a direct and positive effect on student performance and classroom discipline. It is the intent of this
5 Act to encourage school districts to reduce the number of students in each classroom and to maintain
6 economy, efficiency, and academic achievement in each school.

7 * Sec. 2. AS 14.03.120(a) is amended to read:

8 (a) A district shall annually file with the department, and make available to the public,
9 a report that

- 10 (1) establishes district goals and priorities for improving education in the district;
- 11 (2) includes a plan for achieving district goals and priorities; [AND]
- 12 (3) includes a means of measuring the achievement of district goals and priorities;

13 and

- 14 (4) indicates the ratio of students to teachers in each grade K - 12; if the ratio

1 of students to teachers is greater than 20 to 1, the district shall include a plan for reducing
2 the ratio of students to teachers; a district plan for reducing the ratio of students to
3 teachers must identify causes for the high ratio, including any problems unique to the
4 district.

5 * Sec. 3. AS 14.03.120(e) is amended to read:

6 (e) A district shall, by October 31 of each year, provide to the state board, and make
7 available to the public, a report on the performance of each public school and public school
8 students in the district. The report must be entitled "School District Report Card To The Public"
9 and must be prepared on a form prescribed by the department. The report must include

10 (1) the percent of district students in the top and bottom quarter of standardized
11 national achievement examinations; results under this paragraph shall be disclosed in a manner
12 that does not reveal the individual identities of students;

13 (2) the percent of students who are not promoted to the next grade;

14 (3) student, parent, and community member comments on the school's
15 performance;

16 (4) the annual percent change in enrollment and the percent of enrollment change
17 due to student transfers into and out of the district;

18 (5) attendance, retention, and graduation rates;

19 (6) the ways in which meaningful parent involvement in school performance was
20 achieved;

21 (7) the effect of the ratio of students to teachers on the school's performance;

22 ~~(8)~~ other indicators of school performance required by the state board; and

23 ~~(9)~~ [(8)] other indicators of school performance selected by the district.

POSITION PAPER: DEPARTMENT OF EDUCATION

Division Educational Program Support Bill Number SB 264

Bill Title An Act relating to the ratio of students to teachers in public schools.

Sponsor Senator Rodev

Position Statement: Explain briefly what the bill does, its impacts and Department's position, i.e., a) support, b) do not support, c) neutral or d) oppose.

The Department is in the first full year of implementation of AS 14.03.120 (a) and (e). As a matter of general policy, the Department would prefer no changes be made in the law until one complete implementation cycle has been completed. At that time, changes in the law to make it more workable and policy related changes could be integrated into a comprehensive legislative package.

On the merits of the specific bill, the Department is neutral. However, planning for reducing class size and actually reducing class size are much different activities. Given the current revenue forecasts, it may not be possible for districts to implement any plans that are developed, making the development of the plans an activity that might possibly mislead the public into thinking that class size will actually be reduced.

The bill calls for districts to determine "the effect of the ratio of students to teachers on the school's performance." To be consistent with the planning requirement, the department recommends the language be amended to read, "the annual progress the district has made in reducing class size."

APPROVED:

Director Ed Westlund Division Educational Program Support

Signature *E. Westlund* Date 3-11-92

Commissioner/Deputy Jerry Covey/Karen Crane

Signature *Michelle M. ...* Date 3-11-92



NEA-ALASKA

AFFILIATED WITH THE NATIONAL EDUCATION ASSOCIATION

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FAIRBANKS, ALASKA 99701
(907) 456-4435
FAX: (907) 456-2159

March 10, 1992

TO: SEN. Sturguleswki, Chair
Members of Senate HESS Committee

RE: SB 264: "An Act relating to the ratio of students to
teachers in public schools."

NEA-Alaska strongly supports and encourages your positive consideration of SB 264. We have long sought legislation that addresses the need encourage or mandate a reduction in class size in our schools.

Section 1 speaks to our concern very clearly, "The legislature finds that placing students in a smaller class has a direct and positive effect on student performance and classroom discipline." This bill is needed even if there is the passage of mandatory class size limits in the future. There are ample studies that supports the concept that reduced class sizes clearly improves student performances.

We seek your favorable consideration of this piece of legislation. This bill is an appropriate precursor to legislation that funds class size limits.

Thank you for your consideration of our position.

Respectfully submitted,

Vernon Marshall
Executive Director

Don Oberg
President

cc: Sen. Rodey



NEA-ALASKA

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February, 1991

CLASS SIZE: Legislative Proposal

Include a Findings section which reflects the overall goal of achieving lower class sizes which enhance the educational opportunity in public education.

Amend AS 14.03.015, State Education Policy, to indicate that lower class sizes or maximum class size figures in all public schools will enhance the success potential for public school students.

Add a new section, AS 14.03.065 or amend 14.03.060, to provide for maximum class size figures for early primary, K-4. Also, charge the department of education or a special ad hoc task force with making more comprehensive recommendations on class size to the 17th Legislature before it convenes in its Second Session in January, 1992.

These recommendations should reflect the various needs through-out K-12 public education and should be prioritized based upon how well they enhance the learning opportunity for students, cost effectiveness, and anticipate current and future needs of public education in Alaska.

Supplemental, perhaps incentive for start-up purposes, funding is critical if progress is to be made on the class size issue. An appropriation could be made using an additional "class size differential" as an amendment to the area differential concept in AS 14.17.051. Or, a class size supplement could be attached to the Instructional Unit value as an amendment to AS 14.17.056.

For a local district to quality for supplemental or incentive funding specific for the class size problem it may be appropriate to require an additional local contribution under AS 14.17.025.

AS 14.08.111 and 14.14.090 should be amended to require that local school boards develop and implement plans to meet class size guidelines with regular reporting to the department and to the public as to problems and progress.

NEA-Alaska is anxious to work with the Legislature in an effort to more effectively deal with the increasing class size problem.



NEA-ALASKA

AFFILIATED WITH THE NATIONAL EDUCATION ASSOCIATION

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February, 1991

CLASS SIZE

There are volumes of research on class size. The vast majority of it supports the fact that smaller classes have a beneficial impact on educational achievement.

Increasing class size is an acknowledged concern of parents, and educators across Alaska. There is a renewed demand in both urban and rural districts for smaller class sizes. A recent independent audit identified Anchorage as a district having the highest class size among eight other school districts of comparable size in the United States.

Increasing class size is an issue which requires legislative resolution. There is a need for the Legislature and local school boards to establish policies which will provide the resources necessary to resolve the class size problem.

Research indicates that reduced class size has a direct and positive impact on student achievement. The most notable research is from a longitudinal study in Tennessee which shows that reducing class size results in improvement in achievement by at least one grade level, and often more. The Prime Time Program in Indiana has proven that reduced class size has a direct and positive influence on student academic progress.

Every public opinion survey in recent years has indicated that the public is both supportive of reduced class size and believes that reduced class size will have a positive impact on academic achievement. The polls have stated that the element most lacking in public schools is smaller classes. Thirty five percent (35%) of the public surveyed in a nationwide poll stated that their highest concern was the class size problem. Phi Delta Kappa and Gallup Poll Surveys over the years have indicated that the public is willing to pay increased taxes to provide for reduced class sizes in the public schools.

Funding solutions for the class size problem is clearly a public policy issue and a responsibility of the Legislature. Efforts to reduce class size are being funded by state legislative bodies in Washington, Indiana, Tennessee, Kentucky, Ohio, North Carolina and Texas. Urban area school boards are funding efforts to reduce class size.

Studies also emphasize that starting the class size reduction process in the early grades is the most pragmatic approach. The initial investment should be at grades K-3.

Other educational benefits from reduced class size beyond academic achievement are; improved student behavior, improved student self esteem, improved teacher morale, and improved parent-teacher interaction.

NEA-Alaska recommends the following:

- > Establish maximum class size guidelines for all grade levels and subject areas.
- > Require school districts to immediately develop plans to meet the established guidelines, to be reviewed and approved annually to the Alaska State Board of Education, with an annual report to the Legislature.
- > Provide a supplemental annual contingency appropriation, to be administered by the Alaska Department of Education and available to school districts on an incentive basis for approved plans specifically designed to reduce class sizes and maintain them at lower levels.



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, AK 99801-1101 (907) 586-9702 FAX (907) 586-5879

POSITION STATEMENT ON SENATE BILL 278

"An Act imposing a maximum pupil-teacher ratio in public schools; and providing for an effective date."

The concept of lower class sizes in a concept which can be supported as an educationally sound practice. And therefore, in theory, we can support SB 278.

However, for the past several years the educational community has continually brought before the legislature the need for increased funding to meet the present cost of educating the children of Alaska. The legislature has responded by appropriating funds for us to maintain the same level of funding as we have had for the past five years.

SB 278 has a tremendous fiscal impact on every school in Alaska. It would require three new schools for Juneau just to give you an example of the expense districts would incur should this legislation become law.

We have also experienced the passage of mandates for additional programs in our schools which must be funded under existing resources.

Therefore, the Alaska Council of School Administrators can support this legislation only with the assurance that adequate funding will be appropriated to implement the intent of this legislation both in capitol outlay and operating costs.

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Alaska State Legislature

SENATE

Official Business

P.O. Box V
State Capitol
Juneau, Alaska 99811

Memorandum

TO: Senator Arliss Sturgulewski, Chair
Senate Health, Education & Social Services Committee

FROM: Senator Sam Cotten *l*

DATE: May 16, 1991

RE: Senate Bill 278
An Act imposing a maximum pupil-teacher ratio
in public schools

Thank you for scheduling Senate Bill 278 for a hearing tomorrow morning.

Senate Bill 278 would impose a maximum effective class size of 15:1 in K-3, 20:1 in 4-6, and 25:1 in 7-12. Classes in art, typing, library, music, vocational-technical subjects, or physical education would be exempt from the class size requirements. Class size restrictions would not apply during the last eight weeks of each school year and the district would be required to report the average daily class size when it reported average daily membership. The bill defines a "teacher" as someone certified under AS 14.20.020 and who is an actual classroom teacher in a regular instructional program.

The bill also provides, in Section 2, for a transition period.

I am attaching the following for the committee's review:

1. Research Request 91.047 - State Mandates Regarding Class Size.
2. Information from Department of Education on schools with enrollment equal to or greater than 300 students.
3. AS 14.17.160 - Student Counting Periods
4. AS 14.20.020 - Requirements for issuance of certificate.
5. Anchorage School District Class Size Report, October 22, 1990.

Alaska State Legislature

Legislative Research Agency



P.O. Box Y
Juneau, AK 99811-3100
Phone: (907) 465-3991
Fax: (907) 463-3351

October 24, 1990

MEMORANDUM

TO: Representative Sam Cotten

ATTN: Janet Seitz

FROM: Carol R. Vandor *AKV*
Legislative Analyst

RE: State Mandates Regarding Class Size
Research Request 91.047

You asked if the number of pupils per classroom in grades K through 12 is regulated by state law in other states. Attached is a table of state mandates regarding class size. The information was obtained from a survey conducted by the Education Commission of the States in 1989.

The entry under Alaska refers to an Alaska Supreme Court decision that found that class size is not a negotiable item in the collective bargaining process between teachers and school districts. There are no court rulings against the establishment of class size. Alaska statutes do not establish maximum class sizes.

It appears from the table that 33 states mandate maximum class size for at least one grade level or class subject.¹ In some states accreditation or state aid is contingent upon a school or district meeting the required limitation. For instance, in Colorado, kindergarten classes may not exceed 15 pupils and be accredited with the state; the maximum may be 20 with a teacher's aide. In Florida, high school writing classes have a limitation on the number of pupils per class. In Indiana, a building ratio of 30 to 1 must be met. In Iowa, special education classes have a limitation. In Michigan, the state may not fund schools with class sizes over 30 for all grades. In Ohio, the district-wide class size average for grades K-12 is 25. In Washington, class size in grades K-3 must be lower than the class size in grades 4-12.

¹Arkansas, California, Colorado, Florida, Georgia, Hawaii, Idaho, Indiana, Iowa, Kentucky, Louisiana, Maine, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington, and West Virginia.

Representative Cotten
October 24, 1990
Page 2

In some states class sizes are recommended² and in others class size is left to local option.³ In two states, New York and Rhode Island, class size is determined in teacher bargaining negotiations.

Attached are statutes from California, Indiana, Kentucky, Louisiana, Nevada, Oklahoma, Texas, and West Virginia, which provide a sample of how some states mandate class size. I have also included some articles about class size.

If we may be of further assistance, please contact this office.

Attachments

²Alabama, Delaware, Kansas, Maryland, New Hampshire, and Oregon.

³Arizona, Connecticut, Illinois, Pennsylvania, South Dakota, Utah, Wisconsin, and Wyoming.



STATE MANDATES REGARDING CLASS SIZE
1990

Alabama

State Education Agency recommends 25 to 1 in kindergarten with an aide needed in larger classes.

Alaska

State courts ruled against establishment of set class sizes in 1979 litigation.

Arizona

Class size is left to local option.

Arkansas

Kindergarten = 20; grades 1-3 average is 23, with a maximum of 25; grades 4-6 average 25, with a limit of 28; grades 7-12, teachers can instruct no more than 150 students daily.

California

Recommended kindergarten class size is 31 and cannot exceed 33; grades 1-3 may not exceed 32 and the recommendation is 30; grades 4-8 may not exceed 28 and high school classes may not exceed 25 or the district is penalized.

Colorado

Kindergarten classes may not exceed 15 and be accredited by the state. With an aide the maximum can be 20. In the remaining grades, the state does not have regulations on class size. The average is 20 in elementary grades, 17 in middle grades, 18.5 in junior high and 17 in high school.

Connecticut

Class size is left to the local option.

Delaware

A class size for kindergarten through third grade of 19 is recommended.

Florida

The state allows local option for class sizes generally, however high school writing classes do have a limitation. The general theme is to lower class sizes.

Georgia

With an aide, kindergarten classes may be 28. Without an aide the size is not to exceed 21. Grades 1-3 may be 33 with an aide but must not exceed 25. Grades 4-8 carry a maximum of 33 and grades 9-12 of 35. Lab classes may be 28 and remedial classes may be 24 with an aide or 18 without. The state also has district wide average limitations.

Hawaii

Legislated ratio for kindergarten and first grade is 20. Beginning with the 1990-91 school year, second grade classes will be reduced to 20. The third grade class size is to be reduced to 20 in the 1991-92 school year. Average ratio for K-12 is 26.

Idaho

K-1 minimum standards is no more than 25 students which may be exceeded by 5 with a full-time aide in the classroom. This changes in 1991-92 year kindergarten maximum size will be 23. In 1992-93 K-1 shall not exceed 23 students. Grades 2-3 are currently 28 which may be exceeded by 5 with a full-time aide. In 1993-94 2nd grade will change to 26 and in 1994-95 the 3rd grade will change to a maximum of 26. Grades 4-8 maximum is 32 which can be exceeded by 5 with a full-time aide. There are no plans to change this. In grades 7-12, self-contained academic courses, 150 student contacts per day per teacher.

Illinois

Class size is left to the local option.

<u>Indiana</u>	Only requirements are a building ratio of 30 to 1, including kindergarten classes. Operation Prime Time is a voluntary program in which districts agree to lowering class sizes in kindergarten through the third grade: K-1 to 18 and Grades 2-3 to 20.
<u>Iowa</u>	Except for special education classes, class size is left to local option.
<u>Kansas</u>	Class size is left to local option but the state recommendation is 20 to 1.
<u>Kentucky</u>	Maximum class sizes for academic courses: K-3, 24; grade 4, 28; grades 5-6, 29; grades 7-12, 31. Exceptions must be approved by the State Board for Elementary and Secondary Education.
<u>Louisiana</u>	Kindergarten through third grade classes are not to exceed 26. No teacher at a secondary level shall instruct more than 750 students per week.
<u>Maine</u>	Kindergarten through grade 3 are not to exceed 25. All others carry a recommendation of 25; overall average is 30.
<u>Marvland</u>	Although class size is left to local option, the recommendation is for smaller classes.
<u>Massachusetts</u>	Recommendation is a classes size of 18 in kindergarten and 25 for grades 1-3 however it is left to the local option. There is a requirement that kindergarten classes not exceed 25.
<u>Michigan</u>	State finance plan informs the districts that the state may not fund schools with class sizes over 30 for all grades. Special waivers are possible. In addition, the state has an incentive project available to districts which lower class size in K-3.
<u>Minnesota</u>	Elementary classes are not to exceed 30 but the local boards can request a one year waiver. For grades 7-12 weekly average maximum of 160.
<u>Mississippi</u>	Kindergarten classes are not to exceed 22 or 27 with a full-time assistant teacher is in the classroom. In grades 1-4 the class is not to exceed 27. In self-contained academic core classes for grades 5-8 the class is not to exceed 30. In departmentalized academic core classes serving grades 5-12 the class is not to exceed 33. In academic core classes in grades 7-12 the pupil-teacher ratios are not to exceed 150 students per day maximum for teachers. The ratios all apply to summer school and extended year programs as well. For the grades 1-4 standard, the State Board of Education may waive the district's requirement.
<u>Missouri</u>	For purposes of accreditation, the state specifies 30 in elementary grades with a maximum of 35. The high school classes are to be 35 with a maximum of 40.
<u>Montana</u>	In single-grade rooms, the maximum sizes are not to exceed: 24 in kindergarten, 26 in grades 1-2, 28 in grades 3-4, 30 in grades 5-8. In single-grade in 1992-93 school year the K-2 classes may not exceed 20. In multigrade classrooms, the maximum class sizes are not to exceed: 20 in K-3, 24 in grades 4-6, 26 in grades 7-8. Multigrade classrooms that cross grade level boundaries are to use the maximum of the lower grade. In one-teacher schools, the maximum class size is to be 18 students. In junior high, middle school and high schools the individual academic class is not to exceed 30 students and the number of students assigned a teacher per day is not to exceed 160. That will be decreased to 150 in the 1992-93 school year. Teachers

<u>Nebraska</u>	with a significant writing program, as determined by the local board of trustees, are to have a maximum load of 100 students.
<u>Nevada</u>	Local option is permitted, however the regulations indicate a class size of 25 for accreditation or 30 for schools receiving approval. Legislature has set class size for kindergarten through grade 3 at 15. The legislative intent is to reduce 4-6 to 22 pupils and 7-12 to 25 pupils eventually.
<u>New Hampshire</u>	The following class sizes are recommended: K = 20; grades 1-3 = 22; grades 4-8 = 25; grades 9-13 have a maximum of 30 students with less for lab classes.
<u>New Jersey</u>	Recommendation for kindergarten classes is 20, with a maximum of 25; classes of 26-29 are approved with an aide and if it exceeds 29, the class must be split. For grades 1-12 the size is left to local discretion.
<u>New Mexico</u>	The state is in the process of phasing in legislatively mandated class size reductions. In 1990-91 kindergarten classes are not to exceed 20 unless they have an instructional aide in the classroom; in 1991-92 the first grade will be added to the 20 limit; in 1992-93 second grade classes are to be reduced to 22; in 1993-94 third grade classes are to be 24; in 1994-95 the fourth grade classes are to be limited to 25; in 1995-96 the fifth grade is added to the 25 student limit and in 1996-97 the sixth grade is added. In the seventh and eighth grades the daily combined total for classes is not to exceed 150. Language arts classes are not to exceed 135 and no language class is to be larger than 27. For high school, no language arts class is to be larger than 30 and the daily combined total is not to exceed 150.
<u>New York</u>	In most district, class sizes are determined in bargaining negotiations with teachers.
<u>North Carolina</u>	Maximum class size in K-9 is 29. All K-3 classes must have an aide. Secondary class size maximum is 32.
<u>North Dakota</u>	Maximum classroom enrollment for 1 grade rooms is 25 for K-3 and 30 for 4-8. For two grade rooms, K-3 is not to exceed 20 students and 4-8 is not to exceed 25. For three grade rooms maximum for all classes is 15. For four grade rooms the maximum is 10 students. For secondary, junior high, middle school: grades 7-12 class size is recommended at 25 students per class and shall not exceed 30. However, a school unit is allowed 3% of the total number of classes taught to exceed 30 students, to a maximum of 34 students per class, without citation.
<u>Ohio</u>	Limitation on district wide class size average for grades K-12 is 25.
<u>Oklahoma</u>	After the 1990-91 school year, the state will not provide state aid beyond 20:1 ratio for all grades.
<u>Oregon</u>	The school district is to maintain class sizes and teacher assignments which promote effective practices consistent with the outcomes expected of each instructional program. In determining the class sizes, the local district is to consider the following: a) The teacher-student ratio of each class; b) the total number of students assigned per teacher; c) the number of subject preparations or grades per teacher; d) the support staff available to each teacher; e) the nature of the subjects taught in relation to each teacher's professional preparation; f) the appropriateness of instructional facilities and equipment; g) the course goals applicable to the particular class; and

h) the extent to which class size varies from general statewide practice.

Pennsylvania
Rhode Island
South Carolina

Determination is left to local district option.
Class size is determined in local teacher bargaining negotiations. For kindergarten through the third grade, class sizes are not to exceed 30. In kindergarten a full-time aide must be in the classroom. In addition, the districtwide average daily membership of K-3 classes must not exceed 21 in reading and math classes. For fourth through sixth grade the class size must not exceed 30 in reading and math or 35 in all other classes. For grades seven through twelve the class size is 35 in all classes.

South Dakota
Tennessee

Class size is left to local district determination.
Maximum membership of classes is not to exceed: K-3, 25 students; grade 4, 28 students; grades 5-6, 30 students; and grades 7-12, 35. For kindergarten through fourth grade classes, the size is not to exceed 22. For all remaining grades, the size is left to the local district's option.

Utah
Vermont

Class size is left to the determination of the local district.
Limitations are based on a school average. K-3, 20; grades 4-6, 25; grades 7-12, teacher is limited to 150 students daily. English teachers are limited in grades 7-12 to 100 daily.

Virginia

Kindergarten classes are not to exceed 25 unless there is a full-time aide, in which case the class may not exceed 30; grade 1, 24 and no more than 30; grades 2-3, 25 and no more than 30; grades 4-6, 25 and no more than 35.

Washington

The class size in grades K-3 shall be lower than the class size in grade 4-12.

West Virginia

Kindergarten class size is 20; grades 1-6, 25. Classes can go about the limit by 3 students but this usually requires permission.

Wisconsin
Wyoming

Class size is left to local district option.
Class size is left to local district option.

/mb
10/15/90

State of Alaska
Department of Education
Office of Data Management
School Statistics

representing schools with enrollment equal to or greater than 300 students
As of October 1, 1990
FY91

District Name	School Name	Grade Range	Enrollment KG-12 persons	Classroom Teacher FTE	pupil Staff Ratio
Alaska Region Schools	Ann C. Stevens Elementary School	K - 06	491	29.00	16.93
Anchorage School District	Abbott Loop Elementary	PE - 06	757	33.50	22.59
	Airport Heights Elementary	PE - 06	334	17.00	19.64
	Aurora Elementary	PE - 06	405	18.50	21.89
	Bartlett High School	09 - 12	1,604	70.20	22.84
	Baxter Elementary	PE - 06	465	21.00	22.14
	Bayshore Elementary	KG - 06	409	22.50	22.17
	Bear Valley Elementary	KG - 06	549	24.50	22.40
	Birchwood ABC Elementary	PE - 06	353	17.00	20.76
	Campbell Elementary	PE - 06	387	17.50	22.11
	Central Jr High ABC	07 - 08	548	27.60	19.85
	Chester Valley Elementary	PE - 06	411	20.00	20.55
	Chinook Elementary	PE - 06	564	27.00	20.88
	Chugiak Elementary	PE - 06	560	24.50	22.85
	Chugiak High	08 - 12	1,552	61.60	25.19
	Clark Junior High School	07 - 08	725	31.33	21.11
	College Gate Elementary	PE - 06	371	16.00	23.18
	Creekside Park Elementary	PE - 06	397	19.50	20.35
	Denali Fundamental	PE - 06	463	29.00	15.96
	Dimond High School	09 - 12	1,842	80.00	23.02
	Eagle River Elementary	PE - 06	656	29.00	22.62
	East High School	09 - 12	1,659	66.60	24.90
	Fire Lake Elementary	KG - 06	552	22.50	24.53
	Gladys Wood Elementary	KG - 06	510	22.50	22.66
	Gruening Jr High	07 - 08	867	38.60	22.46
	Homestead Elementary	KG - 06	484	21.50	22.51
	Huffman Elementary	PE - 06	655	29.50	22.20
	Jane Mears Jr High	07 - 08	936	44.00	21.27
	John F Kennedy Elementary	PE - 06	302	14.50	20.82
	Klatt Elementary	PE - 06	526	27.00	19.48
	Lake Otis Elementary	KG - 06	566	24.00	23.58
	Mountain View Elementary	KG - 06	642	37.00	17.35
	Mt Spurr Elementary	PE - 06	343	15.00	22.86
	Muldoon Elementary	KG - 06	377	19.50	19.33
	North Star Elementary	KG - 06	455	24.50	18.57
	Northern Lights ABC Elementary	KG - 06	361	15.00	24.06
	Northwood Elementary	KG - 06	556	24.50	22.69
	Nunaka Valley Elementary	PE - 06	353	17.50	20.17
	O'Malley Elementary	PE - 06	497	21.00	23.66
	Ocean View Elementary	KG - 06	474	21.00	22.57
	Orion Elementary	PE - 06	576	24.00	24.00
	Plamigan Elementary	KG - 06	326	17.50	18.62

District Name	School Name	Grade Range	Enrollment KG-12 persons	Classroom Teacher FTE	pupil Staff Ratio
	Rabbit Creek Elementary	KG - 06	512	25.00	21.28
	Ravenwood Elementary	PE - 06	558	23.50	23.74
	Rogers Park Elementary	KG - 06	535	23.10	23.16
	Romig Junior High School	07 - 08	650	35.00	18.57
	Sand Lake Elementary	PE - 06	651	28.00	23.25
	Scenic Park Elementary	PE - 06	555	22.36	24.88
	Service High School	09 - 12	1,973	78.60	25.10
	Spring Hill Elementary	PE - 06	774	33.50	23.10
	Susitna Elementary	KG - 06	527	22.00	23.95
	Taku Elementary School	KG - 06	372	18.50	20.10
	Tudor Elementary School	KG - 06	582	27.00	21.55
	Turnagain Elementary	PE - 06	641	28.00	22.89
	U.S. Manshew Jr High	07 - 08	1,281	54.60	23.46
	Ursa Major Elementary	PE - 06	410	21.00	19.52
	Ursa Minor Elementary	PE - 06	671	14.00	22.92
	Wendler Junior High School	07 - 08	918	40.70	22.03
	West High School	09 - 12	1,308	59.00	22.67
	Williwaw Elementary	PE - 06	408	22.00	18.54
	Willow Crest Elementary	PE - 06	519	24.50	21.18
	Wonder Park Elementary	KG - 06	440	39.50	11.13
Centralized Correspondence	Centralized Correspondence	KG - 12	877	18.25	48.05
Dillingham City Schools	Dillingham Elementary School	KG - 08	347	19.50	17.79
Fairbanks North Star Borough School	Anderson Elementary	PE - 02	426	20.00	21.30
	Badger Road Elementary School	PE - 04	547	29.10	18.79
	Barnette Elementary School	PE - 06	441	26.50	16.61
	Ben Eielson Jr/Sr High School	07 - 12	559	36.18	15.45
	Chena Elementary	PE - 04	301	19.00	15.84
	Denali Elementary School	PE - 06	441	24.50	18.00
	Fairbanks Correspondence	KG - 12	371	4.00	92.75
	Hunter Elementary	KG - 06	472	25.50	18.50
	Joy Elementary	PE - 06	679	34.00	19.97
	Lathrop High School	09 - 12	1,344	73.65	18.24
	Nordale Elementary	PE - 06	554	27.00	20.70
	North Pole Elementary	PE - 04	558	30.00	18.60
	North Pole High School	09 - 12	865	47.60	18.17
	North Pole Middle School	06 - 08	718	42.00	17.09
	Pearl Creek Elementary School	PE - 06	598	33.36	17.92
	Ryan Middle School	07 - 08	645	39.00	16.53
	Tanana Junior High School	07 - 08	708	43.00	16.46
	Ticasuk Brown Elementary	PE - 04	554	30.00	18.46
	University Park Elementary	KG - 06	597	30.00	19.90
	Weller Elementary	KG - 06	663	36.10	18.36
	West Valley High School	09 - 12	812	41.20	19.70
	Woodriver Elementary	KG - 06	584	30.50	19.14
Juneau Borough Schools	Auke Bay Elementary School	KG - 04	538	28.40	18.94
	Floyd Dryden Middle School	06 - 08	686	37.70	18.19

District Name	School Name	Grade Range	Enrollment KG-12 persons	Classroom Teacher *FTE	Pupil Staff Ratio
	Gastineau Elementary	KG - 04	392	20.30	19.31
	Glacier Valley Elementary	KG - 04	573	34.00	16.85
	Harborview Elementary	KG - 04	616	35.50	17.35
	Juneau Douglas High School	09 - 12	1,289	66.40	19.41
	Marie Drake Middle School	06 - 08	467	29.50	15.83
	Mendenhall River Community School	PE - 04	520	29.50	17.62
Coast Peninsula Borough Schools	Homer Senior High School	09 - 12	451	29.00	15.55
	Kalifornsky Beach Elementary	KG - 06	410	24.00	17.08
	Kenai Central High School	09 - 12	422	29.50	14.30
	Mt. View Elementary School	03 - 06	492	25.00	19.68
	Nikiski Junior/Senior High School	07 - 12	457	28.60	15.97
	North Star Elementary	KG - 06	374	18.00	18.00
	Paul Banks Elementary School	KG - 04	402	22.50	16.08
	Redoubt Elementary School	KG - 06	431	23.50	18.34
	Sears Elementary	KG - 02	449	21.80	20.13
	Seward Elementary School	KG - 06	450	23.00	19.56
	Seward High School	07 - 12	314	23.00	13.65
	Skyview High School	09 - 12	444	28.00	15.85
	Soldotna Elementary School	KG - 06	528	28.50	18.52
	Soldotna High School	09 - 12	488	32.00	15.25
	Soldotna Junior High School	07 - 08	486	27.00	18.00
Fitchikan Gateway Borough Schools	Houghtaling Elementary School	KG - 06	521	24.00	21.70
	Ketchikan High School	08 - 12	726	35.00	20.74
	Point Higgins School	PE - 06	368	17.00	21.64
	Schoenbar Junior High School	07 - 08	403	21.00	19.19
	Valley Park Elementary School	KG - 06	361	15.50	23.29
Kodiak Island Borough Schools	East Elementary School	KG - 04	487	22.00	22.13
	Kodiak Junior High School	06 - 08	521	27.00	19.29
	Kodiak/Aleutian Regional High	09 - 12	565	35.40	15.96
	Main Elementary School	PE - 04	307	15.00	20.46
	Peterson Elementary School	KG - 04	316	13.50	23.40
Lower Kuskokwim Schools	Bethel Regional High School	07 - 12	341	31.00	11.00
	Bethel-Kilbuck Elementary	KG - 06	461	35.00	13.17
Mat-Su Borough Schools	Big Lake Elementary School	KG - 06	561	27.00	20.77
	Butte Elementary School	KG - 04	350	19.00	18.42
	Colony Middle school	06 - 08	764	37.50	20.37
	Cottonwood Creek Elementary	PE - 04	454	27.25	16.66
	Finger Lake Elementary	PE - 04	415	29.25	14.69
	Houston Jr./Sr. High School	07 - 12	489	26.00	18.80
	Iditarod Elementary School	KG - 04	467	24.50	19.06
	Palmer High School	09 - 12	897	48.00	18.68
	Palmer Middle School	06 - 08	575	33.00	17.42
	Pioneer Peak Elementary	KG - 06	541	25.50	21.21
	Sherrrod Elementary School	03 - 04	390	22.50	17.33

District Name	School Name	Grade Range	Enrollment KG-12 persons	Classroom Teacher *FTE	Pupil Staff Ratio
	Snowshoe Elementary School	KG - 04	589	26.00	22.65
	Swanson Elementary School	KG - 02	401	18.00	22.27
	Tanaina Elementary School	KG - 04	584	27.50	21.23
	Wasilla High School	09 - 12	933	56.00	16.66
	Wasilla Junior High School	06 - 08	579	34.00	17.02
Nome City Schools	Nome Elementary School	KG - 06	461	25.50	18.07
North Slope Borough School District	Ipalook Elementary School	PE - 06	478	42.00	11.38
Northwest Arctic Borough Schools	Kotzebue Elementary School	PE - 06	402	25.00	16.08
Petersburg City Schools	Petersburg Elementary School	KG - 04	364	19.90	18.29
Sitka School District	Blatchley Middle School	06 - 08	414	23.50	17.61
	Sitka High School	09 - 12	443	28.80	15.38
	Verstovia Elementary School	03 - 04	499	24.00	20.79
Valdez City Schools	Hermon Hutchens Elementary	PE - 06	428	26.75	16.00

* FTE is Full Time Equivalent and represents the portion of time an individual is allocated for that job. For example if an individual is a half-time principal and half-time classroom teacher, the FTE for each job would be .50 and their total FTE would be 1.00.

Pupil Staff Ratio is derived by dividing the Total KG-12 Enrollment by the Total Classroom FTE for each school.



ANCHORAGE
SCHOOL DISTRICT

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

January 11, 1991

SCHOOL BOARD

Sharon Richards
President

Carol Stolpo
Vice President

Darryl Jordan
Clerk

Cabot Christianson
Treasurer

Walter T. Foalherly

Vinco Casey

Theresa Obermeyer

SUPERINTENDENT

Thomas C. O'Rourke

Senator Sam Cotten
11940 Business Blvd.
Eagle River, Alaska 99577

Dear Senator Cotten:

Attached is information requested by Julie Kraft. The large report is the District's most recent class-size report. The single sheet is taken from our District's financial planning document prepared for the School Board last October.

Our Superintendent, Tom O'Rourke, has indicated he intends to pursue class-size reductions at Grades 1 - 3 of 2 students per class and to pursue a one student reduction in all other grades. This would equate to about an additional cost of \$4.2 million dollars for our District.

If we can provide additional information please let us know. We appreciate your interest and advocacy for kids.

Sincerely,

BOB CHRISTAL
ASSISTANT SUPERINTENDENT
INSTRUCTION

ID11.37

Attachments

ANCHORAGE SCHOOL DISTRICT
ANCHORAGE, ALASKA

ASD MEMORANDUM #107 (90-91)

October 22, 1990

TO: SCHOOLBOARD
FROM: OFFICE OF THE SUPERINTENDENT
SUBJECT: SCHOOL CLASS SIZE REPORT

*Carol L. Hamman
by Bob Chastel*

PERTINENT FACTS:

Each year the District compiles an Elementary Schools' and Secondary Schools' class size report. This year we have combined the two reports and have provided these within this memorandum. The increases in class sizes at both elementary and secondary school levels is a direct result of the budget reductions from last spring.

Elementary Schools

Attached are summary results of the class size survey conducted at the elementary school level (Attachment A). This information was based on the enrollment data of September 28, 1990. A comparison of the last seven years' information with the current information is shown on Attachment B.

The current pupil-teacher ratio and a comparison of the last seven years is shown on Attachment C. This is based on actual classroom teachers and excludes principals, librarians, physical education teachers, music teachers, and counselors.

The pupil-teacher ratio (PTR) for grade 1-6 for this year is 25.2. This compares to ~~24.6 for the same time last year.~~ The principals generally attempt to keep the primary classes smaller. In the first and second grades, the pupil-teacher ratio across the District is 24. In grades 3-6, the overall District average is a PTR of 25.9. The number of combination classes grew from 91 last year to 101 multi-grade classes this year. Classes in the range of 27-30 have increased from 22% to 31%; in the range of 31-32, the increase has been from 11 classes to 18 classes. Had the School Board not added ten (10) additional teachers in the 1990-91 budget the average class size would have been at approximately 26 students.

89-90
23.9

89-90
24.6

The kindergarten class size has remained at 22.8 (PTR). We have analyzed the PTR in kindergarten classes in the full-day and half-day programs. In the half-day kindergarten classes, the average pupil-teacher ratio 22.5. Within the full-day kindergarten program the PTR is 24.5 and we do have at least a half-time aide in each class. If the enrollment exceeds 24, the program was designed so the person becomes a full-time aide in the class.

As of September 28, 1990, we did have 22 (2%) classes with more than 30 students per class. We have no funds available to place teacher aides in these classrooms to provide assistance.

Secondary Schools

Attachment D contains information in three areas for the secondary school class size report: class size frequency; average class size by subject area; and the individual secondary school information.

Secondary school class size has increased as predicted based on the reduction in the number of teachers for this school year. Please note that to reduce the impact on class size, non-instructional use of FTE for programs such as In-school Suspension, school counselors and aides for libraries was discontinued or reduced. The frequency of classes with 25 students and under has been reduced by 27%. The frequency of classes in the 26 to 35 student range has increased by 6%. The number of classes with 36+ students has increased from 151 to 304 or about 100%. Average class size was increased by 1.5 students overall. The increase by subject area is included as part II of the secondary report.

CLL/BC/dc

Attachments

ANCHORAGE SCHOOL DISTRICT
ANCHORAGE, ALASKA

ELEMENTARY EDUCATION

September 28, 1990

CLASS SIZE SURVEY

		TOTAL NO. OF CLASSES	18-20	21-23	24-26	27-30	31-32	OVER 32
GRADE	K	157	30	57	53	17	0	0
	1	140	16	52	53	18	1	0
	2	120	7	34	45	34	0	0
	3	121	2	12	45	57	5	0
	4	118	3	12	55	47	1	0
	5	103	2	17	28	53	3	0
	6	104	5	8	40	40	7	4
COMBINATION	K-1	0	0	0	0	0	0	0
	1-2	20	2	4	13	1	0	0
	2-3	14	1	5	4	3	1	0
	3-4	17	1	1	11	4	0	0
	4-5	16	0	3	8	5	0	0
	5-6	24	3	1	6	14	0	0
	1-2-3	4	0	0	4	0	0	0
	4-6	2	0	0	2	0	0	0
	4-5-6	4	0	0	2	2	0	0
	Total	964	72(7%)	206(22%)	369(38%)	295(31%)	18(2%)	4(0%)
LAST YEAR		940	75(8%)	226(24%)	425(45%)	203(22%)	11(1%)	0
	9-90							

ANCHORAGE SCHOOL DISTRICT
ANCHORAGE, ALASKA

1984-85, 1985-86, 1986-87, 1987-88, 1988-89, 1989-90, 1990-91

Elementary Class Size Comparisons

	<u>1984-85</u>	<u>1985-86</u>	<u>1986-87</u>	<u>1987-88</u>	<u>1988-89</u>	<u>1989-90</u>	<u>1990-91</u>
	9/28/84	9/27/85	9/26/86	9/25/87	9/30/88	9/29/89	9/28/90
<u>Number of</u>							
Elementary Classes	908	908	925	919	928	940	964
Multi-Grade Classes	92 (10%)	87 (9%)	96 (10%)	113 (12%)	98 (10%)	91 (9%)	101 (10%)
Classes over 32	2	0	3	4	1	0	49
Classes over 30	9 ^a	13 ^b	13 ^c	14 ^d	11 ^e	11 ^f	18 ^f

- a) Reduced to 0 by 10/22/84
- b) Additional staff allocation and reorganization of classes eliminated this number to 0 as of October 25, 1985.
- c) 4.0 FTE allocated as teacher aides to 13 classes to assist teachers as of October, 1986.
- d) Additional staff allocation and reorganization of classes along with teacher aides reduced this number to 3 as of October 12, 1987.
- e) Additional staff allocations in mid-September reduced this to 5 with no classes over 32. With Assembly approval on October 25, 1988 additional staffing to provide teacher aides will be available for these classes over 30.
- f) Teacher aide positions have been allocated to those schools who have classes at 30 or over who were not able to reorganize their classes. These 18 classes over 30 cannot be reduced because of lack of funds.
- g) Reduced to 0 by 10/17/90.

ANCHORAGE SCHOOL DISTRICT
ANCHORAGE, ALASKA

Elementary School Pupil - Teacher Ratio
Enrollment Information

	September 28, 1990		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten (Full-Day)	657	27	24.3 ^a
Kindergarten (Half-Day)	2,925	65 (130 classes)	22.5
Grades 1-6	20,384	807	25.2

	September 29, 1989		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten (Full-Day)	584	24	24.3 ^a
Kindergarten (Half-Day)	2,752	61 (122 classes)	22.5
Grades 1-6	19,571	794	24.6

	September 30, 1988		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten (Full-Day)	483	20	24.2 ^a
Kindergarten (Half-Day)	2,543	59 (118 classes)	21.5
Grades 1-6*	19,491	790	24.6
Grades 1-6**	19,491	791	24.6

	September 25, 1987		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten	3,484	76.5 (153 classes)	22.8
Grades 1-6*	19,113	766	25
Grades 1-6**	19,113	767	25

	September 26, 1986		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten	3,733	80 (160 classes)	23.3
Grades 1-6*	19,198	765	25.1
Grades 1-6**	19,198	771	24.9

	September 27, 1985		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten	3,578	79 (158 classes)	22.6
Grades 1-6*	19,041	783.5	24.3
Grades 1-6**	19,041	789	24.1
	September 28, 1984		
	<u>Enrollment</u>	<u>Staffing</u>	<u>PTR</u>
Kindergarten	3,464	74.5 (149 classes)	23
Grades 1-6*	19,982	778	24.5
Grades 1-6**	19,982	783.5	24.3

- a Each full-day class has at least a 3 hour aide.
- * Excludes Reading teachers.
- * * Includes Reading teachers from the schools' FTE allocation.

ANCHORAGE SCHOOL DISTRICT
SECONDARY EDUCATION
September 28, 1990

CLASS SIZE REPORT
90-91 School year

- I. Secondary school class size is reported in the following charts. Class size frequency is presented for secondary schools as a whole in part I. For purposes of comparison, frequencies for the 1989-90 and 1990-91 school year are presented as separate lines in the chart.

ALL SCHOOLS
CLASS SIZE FREQUENCY
1989-90 & 1990-91 SCHOOL YEAR

CLASS SIZE	1 - 20	21-25	26-30	31-35	36+
1989-90	589	537	1018	830	151
1990-91	390	433	1027	928	304

- II. The chart in Part II contains the average class size by subject areas. These calculations do not include special education or students assigned as student aides. Please note, since these are averages about half the classes will be larger than the average and half smaller. Parenthesis (+0.0) indicates change in class size from 1989-90 to 1990-91 school year.

AVERAGE CLASS SIZE
1990-91 School Year

Subject	Average Size	Subject	Average Size
English	26.4 (+1.3)	Foreign Language	28.0 (+2.1)
Math	28.1 (+1.1)	Music/Art	29.1 (+2.4)
Science	28.2 (+1.1)	P. E.	34.9 (+2.5)
Social Studies	28.9 (+1.5)	Vocational Education	24.5 (+0.1)
R.O.T.C.	16.2 (+1.3)		

- III. The chart for individual school subject area averages and class size frequency is attached to this section. Individual school information was used to develop the District summaries.

BARTLETT SENIOR HIGH

10-OCT-1990 19:02

QUARTER SELECTED = 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	9	13	20	18	1	1625	26.64
1000 MATH	2	2	19	20	1	1305	29.66
2000 SCIENCE	2	2	19	17	1	1210	29.51
3000 SOC. ST.	3	3	13	32	1	1572	30.23
3800 ROTC	0	3	2	0	0	123	24.60
4000 FOREIGN LANG	0	3	4	12	4	731	31.78
5000 MUSIC/ART	3	2	1	6	3	509	33.93
6000 PE	0	0	0	5	18	863	37.52
8000 VOC ED	5	4	6	5	4	638	26.58
TOTALS	24	32	84	115	33		

CHUGIAK HIGH SCHOOL
 QUARTER SELECTED - 1
 EXCLUDING SPECED CAREER INDSTUDY MISC

10-OCT-1990 19:03

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	3	5	12	32	2	1628	30.15
1000 MATH	2	4	25	13	1	1297	28.82
2000 SCIENCE	2	7	12	19	0	1162	29.05
3000 SOC. ST.	1	4	9	29	3	1437	31.24
3800 ROTC	2	3	0	0	0	94	18.80
4000 FOREIGN LANG	2	5	6	3	0	418	26.13
5000 MUSIC/ART	4	7	0	4	2	471	27.71
6000 PE	0	1	2	4	17	883	36.79
8000 VOC ED	12	13	14	5	0	954	21.68
TOTALS	28	49	80	109	25		

DIMOND HIGH SCHOOL
 QUARTER SELECTED = 1
 EXCLUDING SPECED CAREER INDSTUDY MISC

10-OCT-1990 19:08

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	7	9	35	13	3	1817	27.12
1000 MATH	3	9	21	21	0	1517	28.09
2000 SCIENCE	8	6	35	2	0	1284	25.18
3000 SOC. ST.	6	0	27	20	4	1625	28.51
3800 ROTC	11	0	0	0	0	125	11.36
4000 FOREIGN LANG	4	2	4	8	3	598	28.48
5000 MUSIC/ART	4	2	4	6	3	559	29.42
6000 PE	1	0	0	7	18	932	35.85
8000 VOC ED	14	7	10	13	2	1078	23.43
TOTALS	58	35	136	90	33		

EAST HIGH SCHOOL
 QUARTER SELECTED - 1
 EXCLUDING SPECED CAREER INDSTUDY MISC

10-OCT-1990 19:08

COURSE	CLASS FREQUENCIES					STUDENT TOTAL STUDENTS	TOTALS AVE. CLASS SIZE
	1-20	21-25	26-30	31-35	36+		
0000 ENGLISH	17	19	13	17	1	1622	24.21
1000 MATH	6	7	7	21	5	1275	27.72
2000 SCIENCE	4	12	18	10	1	1198	26.62
3000 SOC. ST.	6	9	18	14	4	1432	28.08
3800 ROTC	8	1	1	0	0	125	12.50
4000 FOREIGN LANG	4	3	4	12	0	643	27.96
5000 MUSIC/ART	4	2	4	3	4	515	30.29
6000 PE	4	2	5	1	13	759	30.36
8000 VOC ED	10	4	11	2	1	584	20.86
TOTALS	63	59	81	80	29		

QUARTER SELECTED = 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLAS SIZE
0000 ENGLISH	7	7	24	30	3	2025	28.52
1000 MATH	2	4	14	35	1	1716	30.64
2000 SCIENCE	0	8	9	34	0	1553	30.45
3000 SOC. ST.	7	2	21	28	6	1868	29.19
3800 ROTC	8	2	0	0	0	153	15.30
4000 FOREIGN LANG	3	6	12	10	1	888	27.75
5000 MUSIC/ART	2	1	5	3	2	399	30.69
6000 PE	3	1	1	9	17	1081	34.87
8000 VOC ED	17	6	15	15	1	1287	23.83
TOTALS	49	37	101	164	31		

WEST SENIOR HIGH
 QUARTER SELECTED - 1
 EXCLUDING SPECED CAREER INDSTUDY MISC

10-OCT-1990 19:10

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	16	9	20	10	2	1314	23.05
1000 MATH	7	7	12	10	5	1102	26.88
2000 SCIENCE	3	4	21	8	0	1006	27.94
3000 SOC.-ST.	8	11	11	16	4	1303	26.06
3800 ROTC	0	4	0	1	0	126	25.20
4000 FOREIGN LANG	2	1	9	4	2	498	27.67
5000 MUSIC/ART	4	0	10	0	2	425	26.56
6000 PE	7	1	6	3	8	697	27.88
8000 VOC ED	9	5	3	1	6	512	21.33
TOTALS	56	42	92	53	29		

QUARTER SELECTED - 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE.CLASS SIZE
0000 ENGLISH	2	1	4	9	0	465	29.06
1000 MATH	2	3	11	2	0	485	26.94
2000 SCIENCE	0	2	7	7	0	477	29.81
3000 SOC.ST.	1	4	9	3	0	461	27.12
4000 FOREIGN LANG	1	0	1	1	0	73	24.33
5000 MUSIC/ART	2	1	2	0	3	227	28.38
6000 PE	0	0	0	2	11	515	39.62
8000 VOC ED	1	2	2	0	0	121	24.20
TOTALS	9	13	36	24	14		

CLASS DATA SUMMARY
 CLARK JUNIOR HIGH SCHOOL
 QUARTER SELECTED = 1
 EXCLUDING SPECED CAREER INDSTUDY MISC

10-OCT-1990 19:11

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	13	4	11	2	0	649	21.63
1000 MATH	2	5	11	6	0	661	27.54
2000 SCIENCE	1	2	19	2	0	657	27.38
3000 SOC. ST.	0	1	9	11	0	638	30.38
4000 FOREIGN LANG	0	1	1	0	0	51	25.50
5000 MUSIC/ART	2	6	1	5	1	406	27.07
6000 PE	0	1	1	6	11	665	35.00
8000 VOC ED	0	3	5	0	0	211	26.38
TOTALS	18	23	58	32	12		

QUARTER SELECTED - 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTAL STUDENTS	TOTALS AVE. CLASS SIZE
	1-20	21-25	26-30	31-35	36+		
0000 ENGLISH	1	7	13	9	0	839	27.97
1000 MATH	0	8	14	8	0	845	28.17
2000 SCIENCE	0	5	11	13	0	840	28.97
3000 SOC. ST.	0	2	17	10	0	832	28.69
4000 FOREIGN LANG	0	0	2	0	0	54	27.00
5000 MUSIC/ART	5	2	5	1	2	375	25.00
6000 PE	1	1	4	5	14	855	34.20
8000 VOC ED	0	10	4	1	0	375	25.00
TOTALS	7	35	70	47	16		

QUARTER SELECTED = 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTAL STUDENTS	TOTALS AVE. CLASS SIZE
	1-20	21-25	26-30	31-35	36+		
0000 ENGLISH	3	2	16	22	1	1286	29.23
1000 MATH	3	4	22	14	0	1243	29.91
2000 SCIENCE	0	6	23	12	1	1233	29.36
3000 SOC.ST.	1	3	15	21	2	1262	30.05
4000 FOREIGN LANG	1	2	4	3	1	302	27.45
5000 MUSIC/ART	1	2	6	2	6	559	32.88
6000 PE	0	0	0	13	19	1182	36.94
8000 VOC ED	0	3	9	0	0	313	26.08
TOTALS	9	22	95	87	30		

QUARTER SELECTED - 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTAL STUDENTS	TOTALS AVE. CLASS SIZE
	1-20	21-25	26-30	31-35	36+		
0000 ENGLISH	9	10	15	1	0	841	24.03
1000 MATH	4	8	15	6	0	872	26.42
2000 SCIENCE	1	7	15	8	1	885	27.66
3000 SOC. ST.	1	7	16	7	0	854	27.55
4000 FOREIGN LANG	0	1	2	3	0	176	29.33
5000 MUSIC/ART	0	4	4	4	2	457	32.64
6000 PE	0	0	2	6	17	888	35.52
8000 VOC ED	0	2	5	2	0	255	28.33
TOTALS	15	39	74	37	20		

CLASS SIZE ANALYSIS

ROMIG JUNIOR HIGH

10-OCT-1990 19:12

QUARTER SELECTED = 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTALS	
	1-20	21-25	26-30	31-35	36+	TOTAL STUDENTS	AVE. CLASS SIZE
0000 ENGLISH	1	6	9	5	0	557	26.52
1000 MATH	1	0	15	5	0	604	28.76
2000 SCIENCE	2	2	15	3	0	592	26.91
3000 SOC. ST.	1	1	15	3	0	573	28.65
4000 FOREIGN LANG	2	0	1	2	0	124	24.80
5000 MUSIC/ART	2	4	2	0	2	272	27.20
6000 PE	0	1	2	2	10	539	35.93
8000 VOC ED	1	4	4	3	0	316	26.33
TOTALS	10	18	63	23	12		

QUARTER SELECTED - 1

EXCLUDING SPECED CAREER INDSTUDY MISC

COURSE	CLASS FREQUENCIES					STUDENT TOTAL STUDENTS	TOTALS AVE. CLAS: SIZE
	1-20	21-25	26-30	31-35	36+		
0000 ENGLISH	6	4	16	12	0	1033	27.18
1000 MATH	5	6	13	8	0	850	26.56
2000 SCIENCE	2	4	7	17	0	865	28.83
3000 SOC.ST.	0	2	7	19	0	867	30.96
4000 FOREIGN LANG	2	1	0	2	0	125	25.00
5000 MUSIC/ART	3	3	4	0	3	385	29.62
6000 PE	0	0	4	4	12	727	36.35
8000 VOC ED	1	4	3	2	0	259	25.90
TOTALS	19	24	54	64	15		

Reductions in Class Size	Average Class Size Reduction				Budget Development Class Size
	1st Student	2nd Student	3rd Student	4th Student	
Elementary					
Kindergarten Teacher FTE	\$ 180,000 4.0	\$ 225,000 5.0	\$ 270,000 6.0	\$ 315,000 7.0	21.5
Modified Primary	N/A	N/A	N/A	N/A	16.0
Grades 1-3 Teacher FTE	742,500 16.5	810,000 18.0	877,500 19.5	945,000 21.0	26.0
Grades 4-6 Teacher FTE	720,000 16.0	787,500 17.5	855,000 19.0	922,500 20.5	26.0
P.E. / Music / Art Teacher FTE	180,000 4.0	225,000 5.0	225,000 5.0	247,500 5.5	
Elementary Teacher FTE	\$ 1,822,500 40.5	\$ 2,047,500 45.5	\$ 2,227,500 49.5	\$ 2,430,000 54.0	
Secondary					
Grades 7-8 Teacher FTE	382,500 8.5	405,000 9.0	427,500 9.5	450,000 10.0	30.5
Alternative Schools	N/A	N/A	N/A	N/A	20.5
Grades 9-12 Teacher FTE	540,000 12.0	585,000 13.0	630,000 14.0	675,000 15.0	31.5
Secondary Teacher FTE	\$ 922,500 20.5	\$ 990,000 22.0	\$ 1,057,500 23.5	\$ 1,125,000 25.0	
Special Education Teacher FTE	\$ 697,500 15.5	\$ 765,000 17.0	\$ 832,500 18.5	\$ 900,000 20.0	Sp. Ed. Class Size reductions proportionate to regular classes
Incremental Totals Teacher FTE	\$ 3,442,500 76.5	\$ 3,802,500 84.5	\$ 4,117,500 91.5	\$ 4,455,000 99.0	
Cumulative Totals Teacher FTE	\$ 3,442,500 76.5	\$ 7,245,000 161.0	\$ 11,362,500 252.5	\$ 15,817,500 351.5	

Notes To Estimated Class Size Reductions

- Teachers' salary, benefits and substitute are estimated at approximately \$42,000 per class. Amounts shown are based on the estimated cost for newly hired teachers. Therefore, the annual cost would increase if these teachers receive annual incremental salary adjustments.
- Classroom supplies, furniture, and equipment are estimated at approximately \$3,000 per class. Existing student desks, tables, and chairs could be used in some schools, but others would require additional furniture.
- The cost of new school facilities and school support staff, which would also be needed if classes were reduced by 3 or 4 students per class, are not included in the analysis above. Many elementary schools and some of the secondary schools would not be able to add sufficient classrooms to reduce class size by 3 or 4 students per class.
- Increased funding to provide for additional Special Education teacher aides and Bilingual teachers and aides have not been included in the cost estimates.

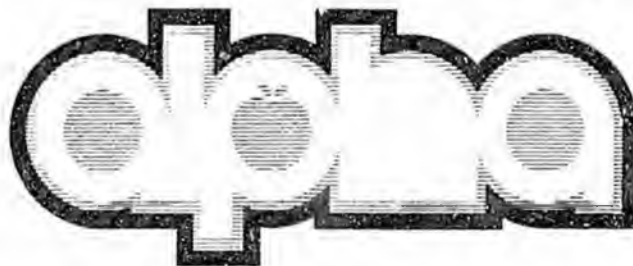
Revenue Considerations

The preceding class size reduction information is presented for preliminary planning and consideration purposes. Class size reductions are a high District priority but because of their cost are very dependent on available funding. However, adequate additional funding to be able to address class size reductions may be received from the State if petroleum prices remain at current levels.

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Alaska Public Health Association



P.O. Box 9-1825 • Anchorage, Alaska 99509

March 9, 1992

Ms. Arliss Sturgulewski, Chairman
Senate Health, Education and Social Services Committee
Senate
State Capitol, Juneau, AK 99801-1182

Dear Senator Sturgulewski:

I understand that the Senate Health Education and Social Services Committee is currently considering the following Bills which are of great interest to the Alaska Public Health Association (ALPHA):

Senate Bill 286, Immunization, Minors
Senate Bill 290, Access, Children, Preventive Health

The membership would greatly appreciate your consideration of ALPHA's position on the Bills as your committee does its work.

SENATE BILL 286 IMMUNIZATION, MINORS

ALPHA opposes enactment of Senate Bill 286, "an Act relating to the immunization of minors". Many people believe that the vaccine-preventable diseases of childhood, measles, mumps, rubella, diphtheria, pertussis, and polio are a thing of the past, and some might even believe that they no longer exist. Except for smallpox, which was eradicated from the world in 1977, those diseases do still exist, but in relatively smaller numbers than in the past. The decline in the incidence rates of childhood diseases is largely attributable to the development of effective vaccines. Twenty-one thousand cases of paralytic polio were reported in the USA in 1952; now, fewer than 10 cases are reported each year. Cases of diphtheria peaked at 207,000 in 1921; four cases were reported last year. During 1990, nearly 28,000 cases of measles were reported in the United States, 18 times the number reported in 1983, and at least 89 people died of measles.

Alaska's current Immunization Program traces its roots to the epidemics of diphtheria and measles in Alaska in 1975 and 1977. Investigation of the measles epidemic in 1977 showed that it occurred because Alaska's school immunization law was not being enforced and children were not being vaccinated. A massive, state-wide vaccination program was effective in stopping the epidemic. Since March 1, 1977, the day care and school immunization regulations have been enforced with great success.

Senate Bill 286 (SB-286) would amend Alaska's school immunization law to allow parents and guardians to exempt their children from all childhood vaccinations merely by stating in writing that their personal beliefs are contrary to immunization. In addition, subsection (c) places decisions about when and how long to exclude unimmunized children from schools during outbreaks of vaccine preventable diseases, in the hands of school administrators and private physicians rather than in the hands of experienced public health authorities. The Alaska Public Health Association is strongly opposed to the adoption of SB-286 because it proposes to weaken a law which, diligently enforced since 1977, has been extraordinarily effective in making Alaska schools safe from vaccine-preventable diseases.

In early 1990 Alaska experienced its largest measles outbreak in 20 years. The epidemic originated in Ketchikan and spread within three weeks to Barrow. Eighty children and adults were affected; one infant died. A remarkable fact about this epidemic is that there was absolutely no evidence of measles transmission within schools, even in Ketchikan, where 42 cases occurred. In contrast, in May 1973, before the school immunization law was stringently enforced, Ketchikan recorded an outbreak of 64 measles cases, all of whom were school aged children. It is only because of the high levels of compliance with the state immunization law and the resulting low levels of preventable diseases, that anyone can even consider allowing a personal beliefs exemption to mandated childhood immunizations.

The success of an immunization program depends upon what is known as "herd immunity": the more people in a community who are immune to a disease, the more difficult it is to introduce that disease into the community. If a group of people who have all been vaccinated against a disease such as measles are exposed to a person who has measles, few or none of those people would contract the disease. In such a situation, a substantial disease outbreak, or epidemic, cannot occur. However, if immunization levels in a community drop, then there are more people susceptible to the disease, and the disease again becomes a potential threat to the community.

It is important to understand also that vaccines are not perfectly protective; not every child who is fully vaccinated against a disease becomes immune to it. Sometimes the vaccine doesn't "take." The percentage of people who are fully protected by administration of a vaccine differs for each vaccine. It is estimated, for example, that between 80% and 90% of persons who receive the full series of diphtheria-tetanus-pertussis (DPT) shots are adequately protected from these diseases. This means that 10-20% of people who have been vaccinated are still susceptible to these diseases.

Parents who elect not to have their children vaccinated put their own children at risk of acquiring such diseases as diphtheria, pertussis, and measles. This would remain a private, personal choice if it had no potential effect on other members of the community. However, because vaccines do not perfectly protect all children who are vaccinated, children who are not vaccinated and who become ill with a vaccine-preventable disease do pose a threat to other members of the community. For this reason, the personal beliefs exemption becomes a significant public concern and not simply an issue of personal choice.

In order for a vaccine to be useful, its benefits must outweigh its risks. Although vaccines are extremely effective in preventing certain diseases and their complications, they are not without side-effects. The side-effects, or adverse effects, associated with vaccine administration may be mild or severe. However, permanent, serious adverse effects associated with vaccines are rare. DPT vaccine, particularly the pertussis component, has for years been attacked as an unsafe vaccine. Massive research activities have been conducted world-wide, predominantly in the United States and Great Britain, to determine the nature and frequency of side-effects associated with DPT vaccination. The National Childhood Vaccine Injury Act (Public Law 99-660), passed by the U.S. Congress in 1986, called for a review of possible adverse consequences of pertussis and rubella; this led to the establishment in 1989 of the Committee to Review the Adverse Consequences of Pertussis and Rubella Vaccines. The results of the committee's review and analysis of all available, pertinent medical and scientific literature were published this year (Adverse Effects of Pertussis and Rubella Vaccines, National Academy Press, Washington, DC, 1991). They concluded, in part, that (1) there is insufficient evidence to indicate any causal relation between DPT vaccine and permanent neurologic damage, and (2) available scientific evidence is consistent with a causal relation between DPT vaccine and acute encephalopathy (an inflammatory brain condition), with an estimated range of risk between 0.0 and 10.5 occurrences per million immunizations. In contrast, natural pertussis disease is complicated by encephalopathy once in every 250 cases. The use of DPT vaccine has resulted in a 93% decline in the number of cases of this potentially fatal disease during the past 50 years. The vast majority of scientists, physicians, and public health officials believe that the benefits of immunization far outweigh the risks.

The Alaska Public Health Association opposes SB-286 because it seeks, without substantial medical justification, to weaken our state's effective school immunization law, a law whose diligent enforcement has minimized transmission of serious illnesses in Alaska's schools for the past 15 years. ALPHA urges you and other committee members to vote against passage of SB-286.

SENATE BILL 290, ACCESS, CHILDREN, PREVENTIVE HEALTH

ALPHA opposes Senate Bill 290, "an Act relating to access for children to preventive health services; and providing for an effective date". ALPHA does not support this Bill for the following reasons:

1.) The intention of this Bill is to create a nonprofit public corporation within the Department of Health and Social Services to "facilitate a program to bring preventive health care services to children" by cooperating "with existing preventive service programs funded by the public or the private sector". The vague notion of coordinating existing programs hardly seems to warrant the establishment of a new state bureaucracy.

2.) The newly established corporation would be seriously handicapped in its mission since it provides no new services for children, nor does it expand or improve upon any existing services. It has no cost containment features, no focus on the improvement of rural services, and intends to fully utilize the extremely inefficient services of the private health insurance industry.

In summary ALPHA opposes Senate Bill 286 and Senate Bill 290 and urges you and your committee members to vote against enactment of these Bills. Thank you for consideration of this matter.

Sincerely yours,

Debra Caldera for

Bill Dann, President
Alaska Public Health Association