

**ALASKA LEGISLATURE COMMITTEE FILES 1993-1994 8672**  
**8491 SENATE STATE AFFAIRS**

**HB**

**315**



Received

JAN 11 1994

January 6, 1994

The Honorable Brian Porter  
Alaska State Legislature  
State Capitol Bldg.  
Juneau, AK 99801-1182

Dear Representative Porter:

On behalf of the entire membership of the Alaska Cable Television Association ("ACTA"), I would like to thank you for your efforts in helping us prepare stronger "Theft of Service" legislation.

Theft of Service within the cable television industry has become annually, a \$4.7 billion dollar monster! As you know, Alaska is not immune from this problem. Cable television operators from throughout the state desperately seek stronger criminal and civil penalties for this high-tech thievery. We can no longer allow honest, paying subscribers to continue to subsidize these illegal activities.

It's important to note that there are many examples of unauthorized access to cable television services. The most common, of course, is the distribution of illegal converter boxes to descramble secured signals. Gary Haynes of Prime Cable has described these activities in great detail. But there are other security devices, such as decoding filters, which are also distributed illegally.

These devices, normally connected to the customer's service drop at the telephone pole or utility pedestal, either "decode" a scrambled signal, or prevent the reception of a channel or block of channels (a "negative" trap). Once tampered with, the outcome is the same with stolen services and lost revenue. Cable operators spend a considerable amount of time monitoring the theft of these filters. Generally, if the device is defeated, the integrity of the physical connection is weakened causing interference to other customer service drops, and contributes to signal leakage putting the cable system at serious risk with potential interference among the aeronautical frequencies. Stolen and/or illegal "decoding" devices are usually installed inside the home, making it virtually impossible to detect.

The ACTA stands by ready to provide you, your staff and the appropriate legislative committees with other examples of illegal equipment used to gain access to secured cable television signals. The ACTA strongly supports this legislation as we estimate that annual theft of cable television service in Alaska exceeds \$1,000,000 based on a conservative rate of 2.5% of service revenues. A more accurate definition of this type of service theft along with stiffer criminal penalties will create a deterrent to those considering the purchase of illegal equipment. Hopefully this would keep the rate of theft from growing and would also

Representative Brian Porter  
- Page 2 -

follow through on the intent of the statute as originally created allowing for the aggressive pursuit of the distributors of such illegal burglary devices.

Please do not hesitate to call on us if we may provide you or staff with any additional information. The ACTA looks forward to working with you on the passage of this important piece of legislation.

Sincerely,

ALASKA CABLE TELEVISION ASSOCIATION



Michael W. Roberge  
President

cc: Eric Musser  
Daniella Loper  
Mary Hughes, Hughes, Thorsness, Gantz, Powell & Brunden  
Gary Haynes, Prime Cable  
Kent Dawson, Dawson & Associates

# ALASKAN CABLE NETWORK INC

Representative Brian Porter  
State Capital  
Juneau, AK 99801-1182


January 20, 1994

Dear Representative Porter;

As the District Manager of the second largest Cable operator in Alaska, please let it be known that I, on behalf of Alaskan Cable Network, fully support your House Bill No 315, concerning the sections that provide for criminal action being taken against a person or persons stealing subscription cable service.

If I can be of further assistance, please let me know.

Sincerely,



Jerry Parker  
District Manager

0014000000- JUN 20 1994 3:46PM #211 P.82  
**ROGERS**

Rogers Cablesystems of  
Alaska, Inc.  
P.O. Box 873107  
Wasilla, Alaska  
99687-3107

Tel: (907) 373-2288  
Fax: (907) 376-8888

January 20, 1994

Representative Brian Porter  
House of Representatives  
State Capitol  
Room 122  
Juneau, Ak. 99801-1182

Dear Mr. Porter:

I am taking this opportunity to extend Rogers Cablesystems support of House Bill 315.

I commend you and Mr. Larson on your effort to clarify and amend the law in regards to Theft Of Subscription Cable Service. Theft of cable service has become a much too common problem. In our industry's effort to combat this problem, it has become a large expense in the operation of a cable company through the development and installation of security procedures such as scrambling devices and placement of set top converters. Cable theft has not only made it more expensive for our customers, it has greatly detracted from our ability to make cable service more compatible with our customer's home video equipment.

It is through the passage of legislation such as House Bill 315 and the efforts of officials such as yourself, that will send a clear message to the public that theft of cable service is a crime and that it will not be tolerated. It will also provide us, along with the cooperation of local law enforcement, the ability to successfully prosecute those individuals who would persist in engaging in this criminal behavior.

I thank you for your efforts and extend an open invitation to call on me to assist in any way I can. Please feel free to contact me at 373-5026.

Sincerely,

  
Kevin Sheridan  
General Manager

DIVISION OF LEGAL SERVICES

LEGISLATIVE AFFAIRS AGENCY  
STATE OF ALASKA

(907) 465-3867 or 465-2450  
FAX (907) 465-2029  
Mail Stop 3101

130 Seward Street, Suite 409  
Juneau, Alaska 99801-2105

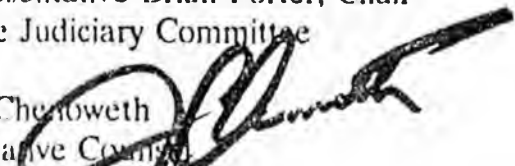
MEMORANDUM

February 4, 1994

**SUBJECT:** CSHB 315 (JUD) -- Sectional analysis (Work Order No. 8-LS1200\O)

**TO:** Representative Brian Porter, Chair  
House Judiciary Committee

**FROM:** Jack Chewoweth  
Legislative Council



CSHB 315 (JUD) amends four sections of the chapter of the state criminal code defining offenses against property--theft offenses--to address theft of subscription cable services.

Essential to an understanding of the bill is an appreciation drawn in its section 3, defining "theft of services." To the definition of "theft of services" is added one additional offense--the taking of services provided by a subscription cable system without authorization of the system. The offense may involve any one of several acts. In bill section 3, proposed AS 11.46.200(a)(4)(A) generally speaks to action taken knowingly in order to obtain unauthorized interception, connection, receipt, or use of a program or other service provided by the subscription cable system, while proposed AS 11.46.200(a)(4)(B) generally prohibits the knowing unauthorized manufacture, distribution, sale, and like acts designed to decode, descramble, or intercept a nonstandard signal carried by the subscription cable system. The distinction essentially is drawn between illicit activity to obtain and use a service without authorization--(a)(4)(A)--and activity intended to capture a financial profit from the sale or distribution of the illicit obtaining or use of the service--(a)(4)(B).

Bill section 1: The bill section amends the definition of the crime of theft in the second degree--a class C felony--to add theft of subscription cable services under AS 11.46.200(a)(4)(B), the activity intended to capture a financial profit from the sale or distribution of the illicit obtaining or use of the service.

Bill section 2: The bill section amends the definition of the crime of theft in the third degree--a class A misdemeanor--to add theft of subscription cable services under

Representative Briar rter  
February 4, 1994  
Page 2

AS 11.46.200(a)(4)(A), the illicit activity to obtain and use a service without authorization of the subscription cable service.

Bill section 4, proposing a new subsection to AS 11.46.200, sets out definitions of terms used in the earlier sections.

JBC:pl  
94-103.plm

# PRIME CABLE

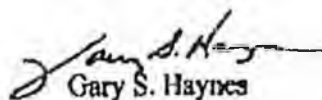
February 4, 1994

The Honorable Brian Porter  
Alaska State Legislature  
State Capital Building  
Juneau, Alaska 99801-1182

Dear Representative Porter:

Prime Cable of Alaska would like to inform you that we are in full support of HB 315 relating to the unauthorized use of or unauthorized interference with transmission and delivery of subscription cable services; and amending the definition of the offense of theft of services and the penalties for its violation. Prime believes that the Bill in its current form will do much to control the dissemination and trafficking of these electronic theft devices and combat the scofflaws who are unfairly reaping financial gain at the expense of everyone from the producer to the local distributor of this copyrighted programming. The work that you and your staff have done on this legislation is greatly appreciated by not only the employees here but also by the many honest subscribers who have called us to complain about the unfairness of their subsidy of this type of criminal behavior. Thanks again for your help.

Sincerely,

  
Gary S. Haynes  
Vice President of Operations



**CableVision**

February 28, 1994

Mr. Eric Musser  
Representative Brian Porter's Office  
Alaska State Legislature  
Juneau, AK 99801-1182

VIA FACSIMILE (907) 465-3834

Dear Eric:

As a follow up to our telephone conversation last week, I am enclosing some information from the NCTA's Office of Cable Signal Theft.

Specifically, the information relates to a comprehensive industry survey taken in 1992, the results of which have been summarized. As you will see, the methodology is applied against cable television systems according to size. If one were apply the survey factors to Alaska, estimated theft would surely exceed \$1,000,000.00. I am contacting our member systems to obtain data on homes passed, basic subscribers and average rates.

I have also received a copy of Larry Buzzell's letter. We have had the opportunity to butt heads with Larry in the past. While I'm surprised that he has taken an interest in this bill, I suspect it may be part of his overall strategy to whip up interest in cable television again, so that he can champion his cause for rate regulation as SB 213, extending the APUC sunset, proceeds through the legislature.

Eric, call me if there's anything you need.

Sincerely,

ALASKA CABLEVISION, INC.



Michael W. Roberge

Enclosures

## 1992 Theft of Service Survey Results

The National Cable Television Association's Office of Cable Signal Theft has reported the results from the 1992 survey of revenue lost to cable television operators due to cable signal theft. The survey was distributed in January 1992 to 2,685 systems. A total of 771 systems reported statistical data (29% response rate) based on 1991 year-end data.

The systems responding represent 27 million homes passed and 16 million subscribers. For analytical purposes, systems were categorized into four groups: under 10,000 subscribers; 10,000-19,999; 20,000-49,999; and 50,000 or more subscribers.<sup>1</sup>

Based on the data provided, the percentage of theft of basic service ranged from 5.81%-14.61% illegal basic service and the percentage of theft of premium service ranged from 6.33%-14.76%. Projecting the larger percentages into the cable universe as a whole in each system-size category produces estimates of over 9.4 million illegal basic and 6.4 million illegal premium users.

Using conservative monthly average rates (\$17.95 basic and \$10.28 premium), the piracy loss translates into over \$4.7 billion in unrealized revenue annually, or almost 24% of gross industry revenue in 1991.

Overall, average percentages of theft are 11.21% of basic service and 11.52% of premium service. This is the first time that estimated premium theft percentages have been greater than basic theft percentages.

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<sup>1</sup> It should be noted that responses to the theft of service survey from large systems (50,000 or more subscribers) represented a larger portion of total responses than large systems represent in the total industry. However, the potential overrepresentation by large systems in the survey results was mitigated by grouping the results into four categories according to system size. The number of households where theft could potentially occur is a conservative figure; in the Nielsen database not all headends report the number of homes passed.

# Cable Piracy Fact Sheet

- ❑ Based on NCTA's cable piracy survey conducted in 1992, the industry loses an estimated \$4,700,000,000 in unrealized revenue annually.
- ❑ FCC and FBI field offices have requested the development of joint industry/government efforts to identify purchasers of pirate devices for turn-in and conversion purposes. The coordination between law enforcement and victimized cable systems across the country has heightened the awareness of the crime.
- ❑ It is illegal to own or be in possession of a descrambler in 31 states.
- ❑ The FCC has stated publicly that "... It's important that the FCC work closely with agencies like Department of Justice to catch people who are selling the electronics which allows this pirating...and that some effort needs to be made by the cable industry to beat piracy..." *San Diego Union*, April 8, 1990
- ❑ OCST works closely with the Department of Justice, the F.B.I., U.S. Customs, U.S. Attorneys, state and local prosecutors and law enforcement agencies to investigate and assist in prosecuting criminal violations.
- ❑ Piracy affects the picture quality of the system by weakening the signal. In some systems poor picture quality is the reason for service calls and other system maintenance which increases system costs and puts pressure on cable rates.
- ❑ Most of the equipment used by cable pirates is not built to system specifications, thus radio signals used to transmit cable television can leak into frequencies reserved for aeronautical and emergency communications, producing potential safety problems.
- ❑ It is estimated that each illegal decoder sold to a consumer costs the cable industry in lost revenue over its useful life expectancy approximately \$3,108.
- ❑ Over the last three years, OCST has been involved in cases resulting in the seizure of over 400,000 devices and cessation of sales totaling in excess of one million units. When incorporated into OCST's Economic Impact Formula, these figures total over \$4.1 billion or just over 19% of the cable industry's 1992 gross revenue.
- ❑ The aforementioned statistics do not incorporate unauthorized reception of pay-per-view programming. Engineering analysis of pirate product seized by law enforcement agencies in 1992 (over 250,000 devices) substantiates that 75% of the units were capable of circumventing addressable technology and allow the illegal reception of pay-per-view services.
- ❑ Sentences in federal and state theft of service cases have ranged from probation to 16 years in prison. Fines and restitution have ranged from several hundred dollars to \$1.3 million. Civil judgments have run as high as \$3.2 million. Actual awards collected have only been a small percentage of these amounts.
- ❑ OCST is currently supporting several criminal theft of service cases across the country, in addition to numerous state, local, and civil cases, potentially representing sales and distribution of hundreds of thousand of descramblers/decoders.
- ❑ In 1992 over 1300 theft of service cases were prosecuted nationwide on federal, state, and local levels.

*For more information contact the Office of Cable Signal Theft at (202)775-3684.*

## Cable Industry Lost Revenue Due to Cable Signal Theft

1992

System Size	Basic	Premium	Total
<b>50,000 or More</b>			
Potential for Theft (households) <sup>2</sup>	30,531,809	19,085,843	—
Theft Percentage <sup>3</sup>	14.07%	13.21%	—
Estimated Thefts (households)	4,295,826	2,518,598	6,814,424
<b>20,000-49,999</b>			
Potential for Theft (households)	20,221,763	13,665,868	—
Theft Percentage	14.61%	14.33%	—
Estimated Thefts (households)	2,954,400	1,958,319	4,912,719
<b>10,000-19,999</b>			
Potential for Theft (households)	10,957,836	7,858,176	—
Theft Percentage	10.37%	14.76%	—
Estimated Thefts (households)	1,136,328	1,159,867	2,296,195
<b>9,999 or Less</b>			
Potential for Theft (households)	18,044,331	12,848,893	—
Theft Percentage	5.81%	6.33%	—
Estimated Thefts (households)	1,048,376	613,335	1,861,711
<b>Total Estimated Thefts</b>	<b>9,434,930</b>	<b>6,450,119</b>	<b>15,885,049</b>
<b>Rates<sup>4</sup></b>	<b>\$17.95</b>	<b>\$10.28</b>	—
<b>Average Number of Pay Services<sup>5</sup></b>	—	3.4	—
<b>Lost Revenue Per Month</b>	<b>\$169,356,994</b>	<b>\$225,444,559</b>	<b>\$394,801,553</b>
<b>Lost Revenue Per Year</b>	<b>\$2,032,283,928</b>	<b>\$2,705,334,708</b>	<b>\$4,737,618,636</b>

2 A.C. Nielsen Co., (Cable On-Line Data Exchange) Database. Data as of October 31, 1992

3 Derived from NCTA Office of Cable Signal Theft 1992 Theft of Service Survey.

4 Paul Kagan Associates, Inc., *Cable TV Financial Databook*, June 1992. Data as of December 31, 1991.

5 Derived from Paul Kagan Associates, Inc., *Census of Cable and Pay TV*. Data as of December 31, 1990.

## Average Lost Revenue For Each Illegal Decoder

To demonstrate potential revenue loss to the cable industry every time a single illegal decoder is sold in the consumer marketplace, OCST developed the following formula on the request of federal authorities to assist the courts in calculating the actual damages of victimized cable television companies:

$$\begin{aligned} & \{(\text{Average pay rate/month}^1 \times \text{average number of pay services in each cable system}^2)\} \\ & \quad \times (12 \text{ months}) \times (7 \text{ years}^3) \\ & = \text{average lost revenue for each decoder.} \end{aligned}$$

Thus, based upon OCST's evaluation, each illegal decoder sold to a consumer costs the cable industry approximately \$3,108 over the decoder's seven year useful life expectancy.

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<sup>1</sup>The average pay rate per month is \$10.28. Source: Paul Kagan Cable TV Financial Databook, June 1992.

<sup>2</sup>The average number of pay services per cable system is 3.6. This figure is derived from Paul Kagan Associates, Inc., *Census of Cable and Pay TV*. Data as of December 31, 1991.

<sup>3</sup>This figure represents the average useful life of a decoder. This figure was established by NCTA's Office of Science and Technology. Estimate is a conservative one since the Office of Science and Technology indicates that advances in decoder technology are resulting in more durable devices.

# Alaska State Legislature

Representative Brian S. Porter



CHAIRMAN  
HOUSE JUDICIARY COMMITTEE

MEMBER  
HOUSE LABOR & COMMERCE COMMITTEE  
SELECT COMMITTEE ON LEGISLATIVE ETHICS

MEMBER  
FINANCE SUBCOMMITTEES  
DEPARTMENT OF LAW  
DEPARTMENT OF PUBLIC SAFETY  
COURTS

SESSION:  
STATE CAPITOL, ROOM 118  
JUNEAU, ALASKA 99801-1182  
PHONE: (907) 465-4030  
FAX: (907) 465-3834

INTERIM:  
716 W. 4TH AVE., SUITE 040  
ANCHORAGE, AK 99501-2133  
PHONE: (907) 258-8197  
FAX: (907) 258-5510

DISTRICT 20

## MEMORANDUM

DATE: March 1, 1994

TO: Senator Loren Leman Chairman  
Senate State Affairs Committee

FROM: Representative Brian Porter *BP*

RE: HB 315 - Theft of Subscription Cable Services

=====

If at all possible, I am asking you to waive the Senate State Affairs Committee referral on this proposed legislation as it has no apparent application to the interests of your committee. The bill did not receive a State Affairs referral in the House.

The intent of the legislation is to define in statute theft of subscription cable service as theft in the second degree for manufacturers and distributors of illegal descrambler devices, and theft in the third degree for the unauthorized use of such a device.

I introduced this bill at the request of Prime Cable of Anchorage and the Alaska Cable Television Association. The bill is supported by each cable operator in the state.

In the event you are unable to waive the State Affairs Committee referral, would you please schedule this bill for a hearing as soon as possible. I believe all of the appropriate documentation is attached.

This Bill passed the House on 2/24/94 by a vote of 31 for and 3 against.

Thank you for your consideration of this request.

BP:elm

Attachments

# PRIME CABLE

March 8, 1993

The Honorable Representative Brian Porter  
State Capitol, Room 122  
Juneau, Alaska 99801-1182

RE: Alaska Theft of Service Statutes

Dear Representative Porter:

Prime Cable of Alaska would like to bring to your attention a problem that is plaguing cable operators in this state as well as nationally "Theft of Cable Service". Especially hard hit are those systems like Anchorage that employ addressable technology for signal security. This problem promises to escalate in that new federal rules may require most cable systems to provide addressable technology to all subscribers in the near future to allow universal access to all programming tiers and pay-per-view services.

The problem presents itself in Alaska as imported or locally modified decoder boxes. Unfortunately in Alaska, state statute does not have the same "possession and sales/distribution" prohibition found in the federal statute. State law only prohibits the use of such devices to circumvent the cable companies securities measures. Please consider the following scenario:

An ex-employee who is familiar with our system, customer base and security practices imports descramblers from out of state at a cost of approximately \$150.00 each and re-sales these to our current subscribers at \$395.00 each. He persuades the subscriber to down grade service to the lowest possible package of broadcast basic but the subscriber actually gets not only all available expanded basic and premium channels but also an average of 22 titles per week of pay-per-view movies. The ex-employee sells 30 converter boxes for a tax free net profit to himself of \$7,350.00 and the cable company loses approximately \$872.00 a month in lost revenue without regard to the loss from the 22 titles of pay-per-view movies. Frustrated legal subscribers hear of this activity and contact the local cable company upset because they honestly pay for the service and have heard of others getting it virtually for free. Naturally the cable company contacts federal authorities to see what they can do about the situation.

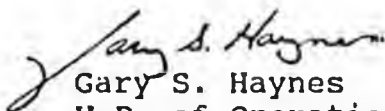
Representative Porter  
March 8, 1993  
Page -2-

Federal law prohibits this type of activity but, as you can see from the enclosed correspondence we received from the local FBI office, we would have to wait for this person to sell over 100 boxes before we could get any federal assistance. The next step is the local Municipal police and District Attorney who are very cooperative but inform us that even if we are able to get a search warrant and find many of these boxes in the residence of the ex-employee ready for delivery, we cannot prosecute for possession or confiscate the equipment but could only prosecute him if we physically saw him using one of the boxes. You can now see what the problem is. The state statute must match federal "possession and re-sale" language before it can be used to stop local distribution of these types of illegal descramblers or decoders.

Unfortunately, not only is the above scenario true in Anchorage, but there are several rings comprised of ex-employees, after hours establishments, drug dealers and even some unscrupulous small businessmen. This situation has been corrected in many other states such as Virginia and California by ensuring that the local laws closely match the possession language and penalties of the federal law.

Our attorney has reviewed the state statute and offers the attached additions to A.S. 11.46 that are specific to theft of cable service and will not only give the cable companies protection from this type of illegal activity but also will give local authorities the means to stop it. The Alaska Peace Officers Association suggested that we contact you to ask if you would be willing to introduce this before the Alaska House of Representatives. If this were to occur, they would consider it for endorsement. Please feel free to contact me at your convenience if you are interested and wish to discuss this further. I may be contacted in Anchorage at 786-9326. Prime Cable wishes to thank you in advance for your consideration.

Sincerely,

  
Gary S. Haynes  
V.P. of Operations

GSH:jb

cc: Kent Dawson

Attachments: 1. Proposed Addition to A.S. 46  
2. U.S. Department of Justice Letter to Prime  
3. Fact Sheet from National Cable Television Assoc.

COALITION OPPOSING SIGNAL THEFT

HB315

**C.O.S.T.**

Advisory Committee to NCTA's Office of Cable Signal Theft

March 9, 1994

- William J. Brennan  
Bresnan Communications  
*Chairman*
- Robert J. Astarita  
Cablevision Systems Corp.  
*Vice-Chairman*
- James S. Allen  
*Executive Director*
- Richard Allerf  
Cable TV Association of  
New York
- Richard F. Annibaldi  
Pioneer New Media  
Technologies Inc.
- W. D. "Bill" Arnold  
Texas Cable TV  
Association
- Mike L. Bales  
Continental Cablevision
- Robert Brillante  
Florida Cable TV  
Association
- Larry D. Coe  
Viacom Cable
- James Coltingham  
Time-Warner Cable
- Ed Desser  
National Basketball  
Association
- Stan H. Durey  
Jerold/General Instrument
- James E. Ernst  
Jerold/General Instrument
- James H. Ewalt  
Cable Telecommunications  
Association
- John S. Fouhy  
Continental Cablevision
- Douglas Garrett  
Tele-Communications, Inc.
- Paul Harr  
Scientific-Atlanta, Inc.
- Thomas M. Haywood  
Adelphia Cable
- C. J. Hirschfield  
California Cable TV  
Association
- John Linebarger  
Jones Intercable Inc.
- Gary Maher  
Illinois Cable TV  
Association
- Thomas Nathan  
Comcast Corporation
- Robert O'Leary  
Cox Cable Communications
- Steve Rabbitt  
Crown Media, Inc.
- John S. Redpath, Jr.  
Home Box Office, Inc.
- Stanley T. Singer  
Pennsylvania Cable TV  
Association
- James "Grey" Smith III  
Times Mirror Cable TV
- Thomas K. Steel, Jr.  
New England Cable TV  
Association
- James Streavy  
Binghamton New Channels
- Michael Ward  
Showtime Networks Inc.
- Roger Williams  
The Travel Channel

The Honorable Loren Leman, Chairman  
of the State Affairs Committee

Alaska State Senate  
311' C Street #425  
Anchorage, AK 99503

Via Facsimile and U.S. Mail

Dear Chairman Leman:

I am writing to ask for your endorsement of the legislation that was referred to the Alaska State Affairs Committee of the 18th Legislature that greatly affects the operations of the cable television industry. This legislation, House Bill 315, amends the definition of the offense and penalties for theft of cable television services.

Theft of cable television services is big business. In 1992, it was estimated that the industry lost over \$4.7 billion, approximately 24% of the cable industry's gross revenue. These figures do not reflect the losses also incurred by local communities that require cable operators to pay up to 5% of their gross receipts in local franchise fees. These losses deprive communities nationwide of upwards of \$235 million in revenue annually.

Presently there are 46 states that have theft statutes that are specific to cable television, 40 states that prohibit the sale, distribution or manufacturing of unauthorized descramblers, and 31 states that prohibit the possession of an unauthorized descrambler. The legislation before your committee would make Alaska's theft of service statute consistent with laws governing theft of cable television service around the country.

I appreciate your attention to the cable industry's need to protect its product. Your committee's endorsement of H.B. 315 will send a clear message to the residents of Alaska that the illegal activity of stealing cable television is will not be tolerated.

Respectfully yours,



James S. Allen  
Executive Director

## Black Angus Inn

1430 Gambell, Anchorage, Alaska 99501  
(907) 272-7505 Reservation: 279-7717

March 10, 1994

To whom it may concern:

I am writing letter to show my support  
as a small business in anchorage for the  
senate bill number SB - 315.  
(HB)

The Black Angus Inn has recently had  
a break in (Date. March 2, 1994)  
in several of its rooms in which one T.V  
eight cable boxes, four lamps, and three  
telephones were stolen. In the rooms we  
found four gang signs printed on the  
walls and sheets. (Municipality of Anchorage.  
police case # 94-33711 police officer: Lantham)

This was not only time we got stolen.  
last year, we lost five cable boxes and 7  
acts like this has a definite impact  
on our business and causes us out of pocket  
expenses to replace the stolen items.

We believe that the rewording of the present  
bill that combats crime and theft may be a deterrent  
in stopping further acts of malicious destruction  
and the stealing of personal property.

AD 1 . . . Black Angus Inn Manager, Inyong S

# PRIME CABLE OF ALASKA, L.P.

♥	Anchorage	5151 Fairbanks Street	99503
♥	Bethel	P.O. Box 247	99559
♥	Konai	139 A Warehouse Ave. Soldotna	99669

TO:

Delia Kallio

FROM:

Kenn Hayes

DATE:

3-14-94

TIME:

440 PM

PAGES (INCLUDING COVER SHEET):

5

MESSAGE:

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PROBLEMS? Call

Judy

at (907) 786- 9331

FAX: (907) 561-1428

**COALITION OPPOSING SIGNAL THEFT**

**C.O.S.T.**

*Advisory Committee to NCTA's Office of Cable Signal Theft*

March 9, 1994

William J. Brosnan  
Brosnan Communications  
**Chairman**

Robert J. Aschaff  
Cablevision Systems Corp.  
**Vice-Chairman**

James S. Allen  
**Executive Director**

Richard Allen  
Cable TV Association of  
New York

Richard F. Annibaldi  
Pioneer New Media  
Technologies Inc.

W. D. "Bill" Arnold  
Texas Cable TV  
Association

Mike L. Bates  
Continental Cablevision

Robert Brillante  
Florida Cable TV  
Association

Larry D. Cool  
Valcom Cable

James Collingham  
Time-Warner Cable

Ed Desser  
National Basketball  
Association

Stan H. Duray  
Jenold General Instrument

James Earnest  
Jenold General Instrument

James H. Ewell  
Cable Telecommunications  
Association

John S. Founy  
Continental Cablevision

Douglas Garrison  
Tele-Communications, Inc.

Paul Han  
Scientific-Atlanta, Inc.

Thomas M. Haywood  
Adelphia Cable

C. J. Hirschfeld  
California Cable TV  
Association

John Linetanger  
Jones Intercable Inc.

Gary Maher  
Illinois Cable TV  
Association

Thomas Nathan  
Comcast Corporation

Robert O'Leary  
Cox Cable Communications

Steve Habbard  
Crown Media, Inc.

John S. Radpath, Jr.  
Home Box Office, Inc.

Stanley T. Singer  
Pennsylvania Cable TV  
Association

James "Troy" Smith III  
Tennessee Cable TV

Thomas A. Steel, Jr.  
New England Cable TV  
Association

James Strenvy  
Brighton Now Channels

Michael Ward  
Showtime Networks Inc.

Roger Williams  
The Travel Channel

The Honorable Loren Leman, Chairman  
of the State Affairs Committee

Alaska State Senate  
3111 C Street #425  
Anchorage, AK 99503

Via Facsimile and U.S. Mail

Dear Chairman Leman,

I am writing to ask for your endorsement of the legislation that was referred to the Alaska State Affairs Committee of the 18th Legislature that greatly affects the operations of the cable television industry. This legislation, House Bill 315, amends the definition of the offense and penalties for theft of cable television services.

Theft of cable television services is big business. In 1992, it was estimated that the industry lost over \$4.7 billion, approximately 24% of the cable industry's gross revenue. These figures do not reflect the losses also incurred by local communities that require cable operators to pay up to 5% of their gross receipts in local franchise fees. These losses deprive communities nationwide of upwards of \$235 million in revenue annually.

Presently there are 46 states that have theft statutes that are specific to cable television, 40 states that prohibit the sale, distribution or manufacturing of unauthorized descramblers, and 31 states that prohibit the possession of an unauthorized descrambler. The legislation before your committee would make Alaska's theft of service statute consistent with laws governing theft of cable television service around the country.

I appreciate your attention to the cable industry's need to protect its product. Your committee's endorsement of H.B. 315 will send a clear message to the residents of Alaska that the illegal activity of stealing cable television is will not be tolerated.

Respectfully yours,



James S. Allen  
Executive Director

# Marston

---

## Properties

---

4105 Turnagain Blvd.  
Anchorage, Alaska 99517  
(007) 248-1717  
Fax (907) 248-3541

March 11, 1994

Senators  
State Capitol Building  
Juneau, AK 99801-1182

RE: Senate Bill No. 315 (HB315)

Dear Senators,

I am writing to you concerning Senate Bill No. 315 which is now pending.

As an Association Manager for twenty-one different Condominium Associations, I am strongly in favor of this Bill and would appreciate any help from you in getting it passed through the Senate.

Many of the Associations that I manage carry bulk cable service and have become the target of theft by gangs. I feel this bill, if passed, would help to alleviate some of these problems in that when caught an additional penalty could be imposed for theft of cable converters.

I do urge you to cast your vote in favor of this bill. If you have any questions please feel free to call me at 248-1717.

Sincerely,

MARSTON PROPERTIES

  
Mark Nilson, AMS  
Association Manager

MN/mko

# PRIME CABLE

March 14, 1994

The Honorable Senator Loren Lemman  
State Capitol, Room 113  
Juneau, Alaska 99801-1182

Dear Senator Lemman:

Prime Cable of Alaska is concerned about the expeditious consideration of HB315 by the Senate and would ask that you review the following recent developments to demonstrate the seriousness of the situation to our operations here in Anchorage.

- Prime Cable has recently received a client list from an FBI sting operation of people in Anchorage who have purchased "descrambler" boxes from a company called Global Cable Network. There have been a large number of people who have ordered these unauthorized electronic burglary tools to avoid paying for premium services, pay per view and special events such as UAA Hockey. Some of the clients have purchased large numbers of boxes for resale in the Anchorage area as well as to other systems in Alaska.
- We have recently run across a student and a faculty member from two local electronic programs offered in local educational institutions who have either purchased whole units or electronic kits that require breaking into our descramblers to defeat the security system. One of these institutions is designed to help problem students learn new skills to become a contributing member of society. Teaching them to defeat the security system of a copyrighted service and perhaps reap great profits from it should not be a part of the curriculum, but the weakness in the present statutes encourages this type of low risk behavior.
- There has been an assault by the criminal element in Anchorage on our commercial accounts to steal cable boxes belonging to Prime Cable for modification and resale at great profit. These include businesses, apartment complexes and recently hotel/motels. I have attached letters from two of the affected parties here that illustrates the ripple affect of the weakness in the current statutes. Please note that although they refer to SB315; they intend to reference HB315.

Senator Loren Leman

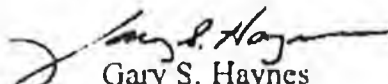
March 14, 1994

Page -2-

- Recent charge of "receipt of stolen goods" on a local electronics company. This shop contained stolen Prime Cable descramblers purchased for \$25 to \$50 and modified for resale at nearly ten times that amount. There were also unauthorized descramblers present for resale not originating from Prime Cable that would allow people to steal our signal, but the present statutes did not allow the police to confiscate them. We could not even charge the accused with theft of cable service due to the weakness in current law but had to rely on a "receipt" charge.
- Report from a very frustrated subscriber that she was aware of at least three drivers for a local cab company that were arranging for black box sales to fares. This same complaint has been reported before, but again the seller would be immune to prosecution since he would not actually be using the device.

For the reasons listed above, as well as to discourage associated criminal activity funded by profits from the sale of these kits and devices, it is important that HB315 be considered at the earliest possible date. Thanks in advance for your consideration and please feel free to contact me with any questions at 786-9326.

Sincerely,

  
Gary S. Haynes  
V.P. of Operations

jb

FISCAL NOTE

STATE OF ALASKA  
1994 LEGISLATIVE SESSION

BILL NO. CSHB 315 (JUD)

Revision Date: February 3, 1994  
Title: "...unauthorized use...unauthorized interference with transmission...cable services..."  
Sponsor: Representative Porter  
Requestor: Representative Porter

Department Affected: Department of Law  
BRU: Prosecution  
Component: All  
COMPONENT SERIAL NO. 0085 through 0030

EXPENDITURES/REVENUES:

OPERATING	FY 95	FY 96	FY 97	FY 98	FY 99	FY 00
PERSONAL						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND &						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

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

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

FUNDING:

1002 Federal						
1003 GF Match						
1004 GF						
1005 GF/Program						
1006 GF/MHTIA						
OTHER						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

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

Estimate of current year (FY94) impact: -0-

ANALYSIS: (Attach a separate page if necessary.)  
Please see the attached analysis.

Prepared by: Richard I. Peques, Director  
Division: Administrative Services Division

Phone: 465-3672

Date: February 3, 1994

Approved by Commissioner: Bruce M. Botelho, Attorney General  
Agency: Department of Law

Date: February 3, 1994

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FISCAL NOTE

STATE OF ALASKA  
1994 LEGISLATIVE SESSION

BILL NO. CSHB 315 (JUD)

ANALYSIS CONTINUATION:

The committee substitute makes some changes in technical terms to clarify the means by which cable theft occurs and that would be prohibited by the bill. Otherwise the bill and its impact remains as described in our earlier analysis, which is repeated below.

Some of this bill is already addressed by existing law, but this bill would also make it a theft offense to buy or possess a "black box" that receives or descrambles coded cable services, or to sell, or to manufacture such devices. It is hard to predict a fiscal impact, but there is likely to be little or none because the current level of cable theft cases is relatively small.

# FISCAL NOTE

STATE OF ALASKA  
1994 LEGISLATIVE SESSION

BILL NO. CSHB 315 (Jud)

Revision Date: \_\_\_\_\_ Dept. Affected: Administration  
 Title: \*An Act relating to the unauthorized use of or BRJ Office of Public Advocacy  
unauthorized interference with transmission and deliver... Component: Office of Public Advocacy  
 Sponsor: Rep. Porter  
 Requestor: (H) Fin COMPONENT SERIAL NO. 43

**Expenditures/Revenues**

(Thousands of Dollars)

OPERATING EXPENDITURES	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
TOTAL OPERATING	0.0	0.0	0.0	0.0	0.0	0.0

CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
----------------------	-----	-----	-----	-----	-----	-----

CHANGE IN REVENUES ( )	0.0	0.0	0.0	0.0	0.0	0.0
------------------------	-----	-----	-----	-----	-----	-----

**FUND SOURCE**

(Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1006 GF/MHTIA	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
Total	0.0	0.0	0.0	0.0	0.0	0.0

Estimate of current year (FY94) cost:

none

**POSITIONS:**

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

**ANALYSIS:** (Attach a separate page if necessary)

Prepared by: Brant McGee, Public Advocate  
 Division: Office of Public Advocacy

Phone: 274-1684

Date: \_\_\_\_\_

Approved by Commissioner: Nancy Bear Usala  
 Agency: Administration

Date: 2/4/94

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Page 1 of 1

# FISCAL NOTE

STATE OF ALASKA  
1994 LEGISLATIVE SESSION

BILL NO. CSHB 315 (Jud)

Revision Date: _____	Dept. Affected: <u>Administration</u>
Title: <u>*An Act referring to unauthorized use</u>	BRU: <u>Public Defender Agency</u>
<u>of cable service . . . *</u>	Component: <u>Public Defender Agency</u>
Sponsor: <u>Rep. Porter</u>	
Requestor: <u>(H) Fin</u>	COMPONENT SERIAL NO. <u>1631</u>

Expenditures/Revenues (Thousands of Dollars)

OPERATING EXPENDITURES	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	0.0	0.0	0.0	0.0	0.0	0.0
SUPPLIES	0.0	0.0	0.0	0.0	0.0	0.0
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES	0.0	0.0	0.0	0.0	0.0	0.0
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANEOUS	0.0	0.0	0.0	0.0	0.0	0.0
<b>TOTAL OPERATING</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

CAPITAL EXPENDITURES	0.0	0.0	0.0	0.0	0.0	0.0
----------------------	-----	-----	-----	-----	-----	-----

CHANGE IN REVENUES ( )	0.0	0.0	0.0	0.0	0.0	0.0
------------------------	-----	-----	-----	-----	-----	-----

FUND SOURCE (Thousands of Dollars)

1002 Federal Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1003 GF Match	0.0	0.0	0.0	0.0	0.0	0.0
1004 GF	0.0	0.0	0.0	0.0	0.0	0.0
1005 GF/Program Receipts	0.0	0.0	0.0	0.0	0.0	0.0
1006 GF/MHTIA	0.0	0.0	0.0	0.0	0.0	0.0
Other	0.0	0.0	0.0	0.0	0.0	0.0
<b>Total</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>	<b>0.0</b>

Estimate of current year (FY94) cost: none

POSITIONS:

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

ANALYSIS: (Attach a separate page if necessary)

Prepared by: <u>John Salemi, Director</u>	Phone: <u>264-4400</u>
Division: <u>Public Defender Agency</u>	Date: _____

Approved by Commissioner: <u>Nancy Bear Usora</u>	Date: <u>2/4/94</u>
Agency: <u>Administration</u>	

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# Alaska State Legislature

Representative Brian S. Porter

CHAIRMAN  
HOUSE JUDICIARY COMMITTEE

MEMBER  
HOUSE LABOR & COMMERCE COMMITTEE  
SELECT COMMITTEE ON LEGISLATIVE ETHICS

MEMBER  
FINANCE SUBCOMMITTEES  
DEPARTMENT OF LAW  
DEPARTMENT OF PUBLIC SAFETY  
COURTS



**DISTRICT 20**

SESSION:  
STATE CAPITOL, ROOM 118  
JUNEAU, ALASKA 99801-1182  
PHONE: (907) 465-4830  
FAX: (907) 465-3834

INTERIM:  
718 W. 4TH AVE., SUITE 040  
ANCHORAGE, AK 99501-2133  
PHONE: (907) 259-8197  
FAX: (907) 259-5510

## SPONSOR STATEMENT HB 315 - Theft of Cable Service

If you are paying for Cable Service, your money is not only used by the local cable company to fund its operation but is also passed on to the people who run the satellites, the programming distributors and the people who produce that programming. If someone is using equipment designed to circumvent paying for these services then they are not only stealing from each and every one of the companies involved in bringing cable programming to your home, they are stealing from you.

The Alaska Cable Television Association estimates that annual theft of cable television service in Alaska exceeds \$1,000,000 based on a conservative rate of 2.5% of service revenues. HB 315 provides a more accurate definition of cable service theft along with criminal penalties which should act as a better deterrent to anyone considering the purchase and use of illegal devices.

Recently published demographic information lists our State as third in population in front of only Vermont and Wyoming. We are, though, the most difficult state in which to provide cable service as we have our small population spread over such a big expanse and have no adjacent population centers. Without a reasonable level of volume, cable service just won't pencil out in a given area and consequently will not be offered. This is one of the reasons why this legislation, to assure, as much as possible, that everyone who receives this service pays for the service, is so important in Alaska. Additionally, there is indication that our illegal interception problem may already be twice as bad as the national average.

This legislation fills a gap in law that now makes enforcement virtually impossible.

I would appreciate your favorable consideration of this important legislation.

STATE OF ALASKA  
THE LEGISLATURE

LEGISLATIVE AFFAIRS AGENCY  
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JUNEAU, ALASKA 99811  
907-465-3800

Copies of minutes listed below were originally included in this file. The minutes are available on the STAIRS database CMPR. In order to save space copies of minutes have not been left in the files.

Mary Van Nimwegen

NB 313

**HB**

**320**

## INTERNAL MEMORANDUM

DATE: October 4, 1993  
TO:  
FROM: Jack E. Phelps  
RE: Rep. Boyer's health education bill (17th Leg.)

This proposal is a seven-part bill, including the first section which sets forth the purpose of the act and has no force of law. Section 5 defines terms, section 6 sets forth a timetable for implementation, and section 7 requires an annual report to the legislature on the progress of the program and its costs.

Sections 2 & 3 are enabling sections which allow REAAs and borough school districts to establish health education curriculum advisory committees. This is added to existing language which allows those same entities to set up advisory school boards and define their powers.

The real heart of the bill is found in section 4. This section redefines the health education curriculum for statewide K-12 programs. It is not, strictly speaking, a mandate, but "encourages" districts to implement a "comprehensive health education" program. It should be noted, however, that if the district elects to implement such a program, the bill's specifications concerning curriculum would become mandatory since the existing language of the statute ("should") is replaced by the term "must." The effect is that districts will fall all over themselves to implement such programs because they allow the districts to justify hiring new staff and the concomitant pleas for ever-larger budgets. In fact, page 3 lines 16 through 22 specifically require the addition of one staff person at the Department of Education, and require the state to provide "adequate funds" for staff and curriculum development for these new services.

Section 4 greatly expands the current definition of a health curriculum set forth in state law. Presently, the curriculum includes: alcohol and drug abuse education; CPR; early cancer prevention and detection; dental health; family health; environmental health; the identification and prevention of child abuse, child abduction, neglect, sexual abuse and domestic violence; and appropriate use of health services.

This bill would add "age appropriate" instruction in:

- tobacco use and abuse, and fetal alcohol syndrome education;
- outdoor survival skills and water and boating safety;
- human growth and development, including human sexuality, reproductive health, pregnancy prevention, prevention and control of diseases, including AIDS and other STDs;
- mental and emotional health, including suicide prevention; and
- nutrition.

In its definition section (section 5), the bill gives a definition of "family health" which includes three elements: personal relationships in light of human development theories; "responsible personal values and behavior" as the basis for family life; and laws regarding sexual conduct. Will human development be taught from the perspective of Darwinian and Freudian presuppositions? We can only expect this will be the case since these are the suppositions that underlie all the doctrines of modern sociology. What "responsible personal values" will be

taught? How can such a subject possibly be taught out of the context of religious beliefs, or without interfering with somebody's religious belief?

Under the definition of "pregnancy prevention," methods of contraception are included. What is "age appropriate instruction" in pregnancy prevention for children in kindergarten, or even third grade? And who decides what is appropriate? Also, who decides how much and what kind of emphasis is placed on abstinence versus condoms or abortion or other forms of "birth control?" What moral rationale will be offered for choosing between the different options? If none, what value will the program have? Knowledge of such topics without moral and ethical underpinnings quickly degenerates into mere titillation—especially among the immature.<sup>1</sup>

Furthermore, the bill would require "training, support groups, and pertinent literature" to involve parents and "other members of the community" in the program. No doubt, significant costs would be incurred if this provision were vigorously pursued. But who would decide which "other members of the community" are to be sought out for involvement? And how would their interests be balanced vis-a-vis those of parents? In this respect, that the bill would require the state Board of Education to consult the Council on Domestic Violence and Sexual Assault in drawing up guidelines for personal safety is a telling fact.

It is true that there are provisions in the bill for allowing parents to "opt out" and have their children exempted from these classes. The bill requires this to be done in a way that prevents embarrassment to the child who is exempted. In reality, we know this won't happen in most cases. For one thing, there is no way for the children who are exempted to be protected against peer pressure and ridicule. Schools are simply incapable of shielding children from the opinions and ridicule of their acquaintances. When this bill was debated on the floor of the House, then-Representative Leman offered an amendment which would have made the program optional for all children. Under Leman's amendment, only those children whose parents signed a form specifically requesting this instruction would get it. This amendment was roundly defeated, showing that the proponents of this instruction are unwilling to have it be anything but virtually universal.

In short, the bill is a virtual blueprint for opening the door to every item on the left-wing agenda of the NEA. It can come as no surprise that the list of the bill's cosponsors reads like a who's who of liberal legislators in the 17th Legislature. It is also not a surprise that Governor Hickel vetoed the bill when it reached his desk. While focusing on family responsibility, his veto message was appropriately restrained, but reading between the lines is rather easy once you have actually read the bill. The law currently on the books is more than sufficient to encourage districts to conduct programs of health education in our schools.<sup>2</sup>

---

<sup>1</sup> Precisely why so-called sex education may be a contributing factor rather than a mitigator in the rise of youthful promiscuity. See my comments on this issue on page 3.

<sup>2</sup> It, in fact, probably goes too far. What, for instance, is "environmental health?" What is "family health," and how do we know we want any particular teacher teaching our children their views of such a topic? See my comments above about the new definition of "family health."

The details of sex education and "AIDS education" do not need to be mandated by state law. To do so would, in my opinion, legitimize and exacerbate too much that is already amiss in the classrooms of our public schools. These subjects simply cannot be taught in a moral vacuum. When sex education is taught apart from Christian morality, the function is reduced to an animal act, and a sense of moral restraint is difficult to justify. If we teach abstinence purely as a discipline apart from a moral purpose, we have only substituted asceticism for ethics. This really is the dilemma of public education once it insists that it must divorce itself from the prevailing national religion—it becomes incapable of sustaining the traditional morality. Nowhere is this more evident than in the subjects covered by this bill.

Sex education, as it has been taught in public schools since the 1960s, has been an abysmal failure, at least in its stated purpose. Teenage sexual activity, teenage pregnancy, the incidence of teenage venereal disease, and teenage abortions have all risen to astronomical proportions under its tenure. While it is tempting to claim that sex education is actually one of the causes of this epidemic, we can at least say with certainty that it has not stemmed the tide. Heck, it hasn't even slowed it down! So why, in heaven's name, would we want to promote more of the same? I suggest that you refrain from introducing this bill, and that if someone else does introduce it, you oppose it with every effort you can muster.

I attach three items for your information: a copy of the bill in its final form; a copy of the statute that would be modified by sections 4 & 5 of the bill; and a copy of the governor's veto message.

SENATE CS FOR CS FOR HOUSE BILL NO. 7 (FINANCE) am S  
 IN THE LEGISLATURE OF THE STATE OF ALASKA  
 SEVENTEENTH LEGISLATURE - FIRST SESSION

BY THE SENATE FINANCE COMMITTEE

Amended: 5/20/91  
 Offered: 5/18/91  
 Referred: Rules

Sponsor(s): REPRESENTATIVES BOYER, Brown, Ulmer, Ellis, B.Davis, Bruckman  
 SENATORS Pearce, Sturgulewski

A BILL

FOR AN ACT ENTITLED

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

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

3 \* Section 1. PURPOSE. The purpose of this Act is to

4 (1) foster the development and dissemination of educational activities and materials that  
 5 will assist students, teachers, administrators, and parents in the perception, appreciation, and  
 6 understanding of health principles and problems, and responsible personal behavior;

7 (2) bring the appropriate agencies of government into the process of developing and  
 8 implementing health and personal safety education;

9 (3) encourage the University of Alaska to add a three-credit course in health education  
 10 and a three-credit course in personal safety education to the core requirements for a degree in elementary  
 11 or secondary education.

12 \* Sec. 2. AS 14.08.115 is amended to read:

13 Sec. 14.08.115. ADVISORY SCHOOL BOARDS AND COMMITTEES IN REGIONAL  
 14 EDUCATIONAL ATTENDANCE AREAS. (a) A regional school board shall establish advisory

1 school boards ~~and may~~ establish health education curriculum advisory committees in each  
2 community in the regional educational attendance area that has more than 50 permanent residents,  
3 and by regulation shall prescribe their manner of selection and organization, and, in a manner  
4 consistent with (b) of this section, their powers and duties.

5 (b) An advisory board shall advise the regional school board on all matters concerning  
6 schools in the community in which the advisory board is established. A health education  
7 curriculum advisory committee shall advise the regional school board on the health  
8 education curriculum at schools in the community in which the committee is established.

9 \* Sec. 3. AS 14.12.035 is amended to read:

10 Sec. 14.12.035. ADVISORY SCHOOL BOARDS AND COMMITTEES IN BOROUGH  
11 SCHOOL DISTRICTS. A borough school district board may establish a health education  
12 curriculum advisory committee and may establish other advisory school boards or  
13 committees, and by regulation shall prescribe their manner of selection, organization, powers,  
14 and duties.

15 \* Sec. 4. AS 14.30.360 is repealed and reenacted to read:

16 Sec. 14.30.360. CURRICULUM. (a) Each district in the state public school system  
17 shall be encouraged to initiate and conduct a program in comprehensive health education for  
18 kindergarten through grade 12. The program must include

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

20 (A) alcohol, tobacco and substance use and abuse and fetal alcohol  
21 syndrome education;

22 (B) first aid, including cardiopulmonary resuscitation (CPR), outdoor  
23 survival skills and water and boating safety;

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

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

28 (E) early cancer prevention and detection, nutrition, dental health, family  
29 health, environmental health;

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

1 (G) appropriate use of health services,

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

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

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

11 (5) a method of notifying parents of students of the content of instructional  
12 materials used in the physical health program and of the parents' option to exempt their child  
13 from physical health instruction; a district shall use procedures to provide that students exempted  
14 from the program are not embarrassed by the exemption.

15 (b) The board shall establish guidelines for a comprehensive health and personal safety  
16 education program. Upon request, agencies of state government shall provide technical assistance  
17 to school districts in the development and delivery of health and personal safety curricula. A  
18 school health and personal safety position shall be established and funded in the department to  
19 coordinate the program statewide. Adequate funds to enable curriculum and resource  
20 development, adequate consultation to school districts, and a program of training and periodic  
21 staff development for administrators and teachers in health and personal safety education shall  
22 be provided. The board shall develop

23 (1) personal safety guidelines in consultation with the Council on Domestic  
24 Violence and Sexual Assault, the Department of Public Safety, the Department of Transportation  
25 and Public Facilities, and other appropriate state agencies;

26 (2) health education guidelines in consultation with the Department of Education,  
27 the Department of Health and Social Services, the University of Alaska, and other appropriate  
28 state agencies.

29 \* Sec. 5. AS 14.30.360 is amended by adding a new subsection to read:

30 (c) In this section,

31 (1) "family health" includes

1 (A) an understanding of the physical, mental, emotional, social, economic,  
2 and psychological aspects of close personal relationships and an understanding of the  
3 physiological, psychological, and cultural foundations of human development;

4 (B) the development of responsible personal values and behavior and the  
5 establishing of a strong family life for students in the future, with emphasis on the  
6 responsibilities of parenting;

7 (C) knowledge of the law relating to the sexual conduct of minors and  
8 sexual abuse of minors, including criminal sexual conduct;

9 (2) "health and personal safety education" includes health education in a school  
10 setting that is planned and carried out with the purpose of maintaining, reinforcing, or enhancing  
11 the health, health-related skills, and health attitudes and practices of children and youth that are  
12 conducive to their good health and that promote wellness, health maintenance, and disease  
13 prevention: it includes age-appropriate, sequential instruction in health either as part of an  
14 existing course or as a special course;

15 (3) "pregnancy prevention" includes

16 (A) abstaining from sexual activity until marriage;

17 (B) skills to enable students to resist peer pressure and abstain from sexual  
18 activity;

19 (C) methods of contraception, and the risks and benefits of each method;

20 (4) "reproductive health" includes human physiology, conception, prenatal care  
21 and development, fetal alcohol syndrome, childbirth, and postnatal care.

22 \* Sec. 6. TRANSITION. The Department of Education shall encourage each school district to begin  
23 development of a comprehensive health education curriculum by July 1, 1992, and to have in place a  
24 program of comprehensive health education by August 1, 1994.

25 \* Sec. 7. REPORT; SURVEY. The Department of Education shall report back to the legislature by  
26 March 1, 1993, on the progress each district has made in implementing this Act. The Legislative  
27 Research Agency shall conduct a survey of a representative sample of school districts to determine the  
28 cost of implementing health and personal safety education curricula in a school district. The survey shall  
29 be conducted in the fall of 1992 and be submitted to the legislature by February 15, 1993.2

Post-It™ brand fax transmittal memo 7671		# of pages >
To <i>Jack Phelps</i>	From	
Co.	Co.	
Dept.	Phone #	
Fax # <i>258-4051</i>	Fax #	

Effective Date: See Chapter

**SB 203**

A message dated June 19, 1991, was received stating the Governor has signed the following bill and is transmitting the engrossed and enrolled copies to the Lieutenant Governor's office for permanent filing:

**SENATE BILL NO. 203**

"An Act requiring that signs warning of possible danger from drinking alcohol during pregnancy also warn of possible danger from smoking cigarettes during pregnancy."

Chapter No. 67, SLA 1991

Effective Date: September 17, 1991

**RCG CSRD 7(FIN) am B**

The following letter, dated June 21, 1991, was received:

Re: SENATE CS FOR CS FOR HOUSE  
BILL NO. 7 (FINANCE) am B  
"An Act relating to public school  
health and personal safety  
education."

"Dear Speaker Gruesendorf:

Under the authority of article II, section 13 of the Alaska State Constitution, I have vetoed (Senate Committee Substitute for Committee Substitute for House Bill 7 (FIN) am B), a bill relating to public school health and personal safety education, with an emphasis on personal values, sexual conduct of minors and pregnancy prevention.

This bill deals with what has become a life and death issue to young Alaskans. Unfortunately, it does not solve the problems it addresses. In fact, it may make them worse.

**RCG CSRD 7(FIN) am B**

We already have in statute the authority for school districts to address these issues if they see fit. The danger of this bill is that it gives the impression that families are absolved of the control responsibility of educating their children on sensitive issues of this nature.

We will never deal with teen pregnancy, venereal disease and AIDS, unless all aspects of our community -- school, church, government and, most of all, the family -- take responsibility. To give the impression, through a piece of legislation such as this, that the schools are now going to "solve" all these issues is unreal and unfair to our teachers and school administrators.

This issue ties in closely with my concerns about what is happening to education as a whole. We cannot expect our educational staff to play the role of parent, pastor, and teacher. Together, we must work to resolve these problems starting in the family, through candid, frank explanations to our children about the dangers and risks involved in early sexual activity.

Sincerely,

/s/

Walter J. Hickel  
Governor"

**HR 45**

A message dated June 21, 1991, was received stating the Governor has signed the following bill and is transmitting the engrossed and enrolled copies to the Lieutenant Governor's office for permanent filing:

**HOUSE BILL NO. 45**

"An Act relating to insurance coverage for mammograms) requiring the medical assistance program to cover mammograms; and reordering the priorities granted to services covered under the medical assistance program."

Chapter No. 69, SLA 1991

Effective Date: September 19, 1991

## INTERNAL MEMORANDUM

DATE: October 12, 1993  
TO: [Redacted]  
FROM: Jack [Signature]  
RE: Rep. Toohey's Health Education bill

Rep. Toohey's proposal differs slightly from the final form of Boyer's bill (HB 7) which I analyzed for you in my memo of October 4. According to Marveen of Rep. Toohey's staff, this bill is Boyer's original bill. Frankly, it is worse.

Whereas, in the final form of HB 7, the program was "encouraged," in this version health education, including sex ed, would be *mandated* in all schools in the state.

The content of section 4 of the bill is virtually the same as HB 7 although it differs slightly in form. Toohey's bill does not include the reporting requirements which were section 7 of HB 7.

It should go without saying that my recommendations remain unchanged from my previous memo.

Attachments include 1) a memo from Rep. Toohey requesting your support for her proposal; 2) a work draft of her proposed bill; 3) a "fact sheet" from DHHS; and 4) a draft copy of "Healthy Alaskans 2000" released by Commissioner Mala's office.



Official Business

# Alaska State Legislature

## HOUSE OF REPRESENTATIVES


REPRESENTATIVE CYNTHIA TOOHEY  
DISTRICT 13

State Capitol  
Juneau, AK 99801-1182

**Interim:**  
Suite 330  
716 W. 4th Ave.  
Anchorage, AK 99501  
Phone: 907-258-8195

### MEMORANDUM

TO: Representative Pete Kott

FROM: Representative Cynthia Toohey 

DATE: October 12, 1993

RE: Healthy Students Bill (school health education)

---

Attached herewith is a draft of the bill I discussed with you. I plan to prefile it this upcoming session. If I make any changes prior to prefiling the bill, I will send you an updated copy. I have also attached a copy of some factual information forwarded to me by the municipality. I look forward to meeting with you in the near future to discuss this issue with you. Your help would be appreciated. Currently there is no school health education mandate in statute; only a recommendation for providing any health and safety education.

I will be out of town until next Thursday, but look forward to a meeting thereafter.

FACT SHEET  
1993THE HIGH "COST" OF  
INADEQUATE HEALTH EDUCATION

## ADOLESCENT HEALTH

- 219 Alaskans, ages 10 -19 years old were infected with gonorrhea in 1991
- 1,133 teens gave birth in Alaska during 1990, including 426 in Anchorage
- In 1989, 6.3% of all births to teens in Alaska produced low-birthweight babies, 13.7% in Anchorage

## COST TO ALASKA

- Teen mothers in Alaska cost the taxpayers \$4 million in 1989
- Alaska families, begun when the mother was a teenager cost Alaska-taxpayers \$51.4 million in 1988 alone
- U.S. taxpayers paid \$19.83 billion in 1988 to support families started by teen parents

---

**TEENAGE SEXUAL BEHAVIOR: A CHALLENGE TO BREAK THE CYCLE**

## 12 MILLION U.S. TEENAGERS ARE SEXUALLY ACTIVE

- In the United States, 53% of teen girls aged 15-17 have had intercourse at least once.
- 60% of sexually active teen women aged 15-19 in the U.S. have had two or more sexual partners.
- 1,281 teens requested birth control from the Municipality of Anchorage (MOA) Family Planning Clinic in 1991. This does not include those receiving birth control elsewhere or those not using any protection.
- Nationally, 44% of all adolescent girls will experience one pregnancy before the age of 20.
- 84% of teenage pregnancies in the U.S. are unintended.
- 430 teens had pregnancy tests in 1991 at the MOA Family Planning Clinic. This accounted for 35% of all pregnancy tests performed there that year. Home pregnancy tests or tests at other facilities are not included.
- An estimated 14% of all national teen-pregnancies end in miscarriage and 40% end in abortion.

## CHILDREN ARE HAVING CHILDREN: 3 A DAY IN ALASKA.

- In 1990, 1,133 teenagers, or 3 a day, gave birth in Alaska. Of these, 17 were under 15 years old.
- Of those 1,133 teenagers who gave birth, 426 were from Anchorage. Six of these were under 15 years old.
- The birthrate for U.S. teens 15-17 was higher in 1989 than in any year since 1974; 19% higher than in 1986.
- Nationally, approximately 50% of teen births are out of wedlock. In Alaska, 65% of teen births are out of wedlock. In the U.S. only 4% of unmarried teenagers who give birth place their babies up for adoption.
- Seven in ten births to teens result from unplanned pregnancies.

## HEALTH RISKS TO TEENS AND THEIR BABIES

- The number of babies who die during their first 12 months is much higher among babies born to teen mothers
- Primary reasons for poor health among children of adolescents are inadequate prenatal care and nutrition.
- In 1989, only 59% of Alaska teens reported adequate prenatal care, 67% in Anchorage.

**TEENAGERS AND RISKS OF DISEASE**

- 2.5 million teenagers contract sexually transmitted diseases (STD's) annually in the United States.
- Sexual activity prior to age 20 increases the risk of cervical cancer.
- Teens are more susceptible to STD's due to increased probability of multiple partners and immaturity of cervical cells.
- Chlamydia represents the most prevalent STD in the U.S., infecting about 4 million people per year. Adolescents have the highest rate of chlamydial infection and associated complications such as pelvic inflammatory disease, ectopic pregnancy and infertility.
- In 1991, the MOA Family Planning Clinic screened 947 teens of which 203 had abnormal pap smears.
- Nearly one million cases of genital warts are believed to occur each year. One study found that 38% of sexually active teens examined were infected with genital warts.
- In 1991, 20 cases of gonorrhea occurred among 10 - 14 year olds in Alaska.
- Teens aged 15-19 accounted for 23% (or 199) of the total Alaska gonorrhea cases in 1991.
- 24% of Alaska's AIDS cases occur in 20 - 29 year olds. Given the average time of 10 years from HIV infection to AIDS, many of these people were probably infected as teens.

**PREGNANT AND PARENTING TEENS SUFFER ACADEMIC FAILURE AND POVERTY**

- Teen mothers frequently find it difficult to return to school due to unavailability of child care.
- Nationally, 60% of teen mothers drop out of school.
- Teens who drop out of school are more likely to have successive pregnancies.
- In 1987, 18% of births to teens in Alaska were second or subsequent births; 28.2% in Anchorage.
- Public funds pay for the delivery costs of at least 1/2 of births to teenagers.

**HOW CAN WE DECREASE THE RISKS OF TEEN PREGNANCY?**

1. Provide health education at home and through schools, religious groups, youth agencies and the media. Education should include:
  - Facts about the biology of fertility and reproduction
  - Information about the emotional and physical aspects of sexual activity including the increased risk of cervical cancer with early intercourse
  - Support for the decision not to have sexual intercourse
  - Discussion about responsible decision making
  - Support to foster the development of self-confidence and healthy self-esteem
  - Factual information about birth control and where it is available
  - Facts about the current epidemic of sexually transmitted diseases to include HIV infection (AIDS)
  - Parenting courses for parents of teenagers and teenage parents
2. Expand the availability of confidential birth control services for sexually active teenagers.
3. Provide quality medical care with emphasis on early prenatal care and proper nutrition for young mothers and their babies.
4. Offer unbiased information and appropriate referrals for those pregnant teens who choose not to become parents.
5. Assure continuing education, social services, and job training for teen parents.

**DATA SOURCE:**

Alaska vital statistics - (1988-91); Children's Defense Fund; National Center for Health Statistics; U.S. Facts in Brief - The Alan Guttmacher Institute - 1993; MOA, DHHS, Family Planning Program - Statistics 1990-91; State of AK - Epidemiology; MOA, DHHS, Adolescent Outreach Information Sheet, 1987; Center for Population Options 1990

Prepared by: Family Planning Advisory Committee



Municipality of Anchorage, Department of Health and Human Services  
 Family Planning Program  
 325 "L" Street  
 Anchorage, Alaska 99501  
 Telephone: (907) 343-4623



Adolescents aged 15 - 19 years comprised 7% of Alaska's 1990 population.<sup>15</sup> Pre-teens and young teens aged 10 - 14 years comprised 8% of the state's 1990 population.<sup>15</sup> The following information was compiled from available national, state, and private resources:

### Onset of Sexual Intercourse

- Alaska teens report having experienced sexual intercourse at ages much younger than teens nationally.<sup>1,4</sup>

- For the 1988-89 school year, a survey of 5,458 students indicated that 52% of those surveyed in the 10th grade have had intercourse.<sup>1</sup>

- By the 12th grade 73% of the females and 67% of the males have had intercourse.<sup>1</sup>

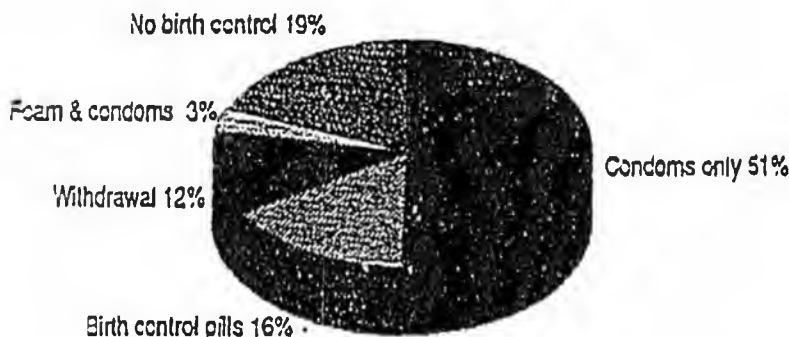
- 25% of surveyed Alaska 8th graders (junior high students) report having had sexual intercourse.<sup>1</sup>

Percent of Students Reporting Having Had Sexual Intercourse				
Grade	Alaska <sup>1</sup> Female	U.S. <sup>2</sup> Female	Alaska <sup>1</sup> Male	U.S. <sup>2</sup> Male
8th	20%	—	30%	—
10th	52%	43%	52%	53%
12th	73%	66%	67%	76%

Average Age of Initial Intercourse Among Sexually Active Adolescents		
Alaska <sup>1</sup>	14.0 years old	13.2 years old
U.S. <sup>4</sup>	16.9 years old	16.1 years old

### Contraceptive Use

Most Common Contraception Reported by Sexually Active Alaskan Teens<sup>11</sup>



- 58% of sexually active teens report often or always using contraception.<sup>10</sup>

- Condoms are the most frequently reported (51%) form of birth control used by sexually active Alaska adolescents; 58% of males and 41% of females use condoms exclusively.<sup>10,1</sup>

- Nearly 42% of sexually active students report rarely, never or sometimes using contraception.<sup>10</sup>

This information obtained from the 1990 Adolescent Health Survey (students surveyed were in grades 7 - 12, outside the Anchorage and Fairbanks areas.)

## Adolescent Pregnancy & Birth Information

- Alaska has the second highest estimated teen pregnancy rate in the U.S.<sup>6</sup>

- For Alaska, approximately one in eight teenage girls between the ages of 15 - 19 will become pregnant.<sup>14,127</sup>

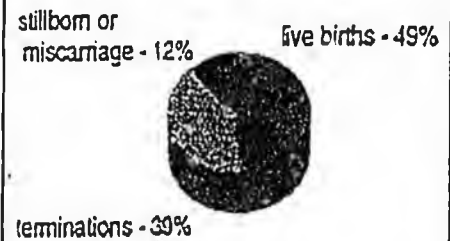
- For Alaska Natives, approximately one in four teenage girls between the ages of 15 - 19 will become pregnant.<sup>14,127</sup>

- Three teenagers a day give birth in Alaska; one a month is 14 years or younger; nearly one in five of these young women is having her second, third or fourth child.<sup>5</sup>

- Teens account for one in every 10 babies born in Alaska.<sup>14</sup>

- More than 1,200 babies were born to teenage mothers in Alaska in 1991.<sup>14</sup>

### Teen Pregnancy Outcomes<sup>12</sup>



An estimated 6% of unmarried teen moms 15-19 placed their child for adoption.<sup>13</sup>

Teen Pregnancy Rate <sup>6</sup>	
Alaska Females	U.S. Females
144/1,000	110/1,000
Estimated rate of pregnancies per 1,000 females age 15-19 in 1985.	

# Births to Teen Mothers in Alaska <sup>7</sup>			
Year	# of Births to Mothers Under Age 15	# of Births to Mothers ages 15 - 19	Total
1988	12	1,044	1,056
1989	15	1,180	1,195
1990	17	1,161	1,178
1991	19	1,266	1,285

## Annual Public Cost of Teen Parenting

- \$51.4 million is spent to assist Alaska families that were started when the mother was a teenager.<sup>5</sup>

- \$4 million is spent to assist mothers who are currently teens.<sup>5</sup>

- More than \$12,000 is spent to support each family headed by a teenager.<sup>5</sup>

## Sexually Transmitted Diseases

- In 1991 adolescents aged 15 - 19 years comprised 23% (199 out of 880) of the state's total reported gonorrhea cases.<sup>9</sup>

- In 1992 adolescents aged 15 - 19 years comprised 28% of the state's total reported gonorrhea cases - the highest rate of any age group.<sup>9</sup>

- In 1992 adolescents age 15 - 19 years comprised 50% of the state's total chlamydia positive tests.<sup>9</sup> (Chlamydia is not reportable, this data represents four public health sites that are testing) At this rate, Alaska teens (15 - 19) are six times more likely to have chlamydia than gonorrhea.

- In Alaska, 20-29 year olds account for 24% of all AIDS cases. Given the average time of time years from HIV infection to AIDS, many of these people were probably infected as teens.<sup>9</sup>

## Key Definitions

**Teen Pregnancy Rate:** Number of conceptions (births + abortions + miscarriages) per 1,000 women in a specified age group.

**1990 Adolescent Health Survey:** This study surveyed students in grades 7 - 12 throughout Alaska with the exception of the Anchorage and Fairbanks school districts.



**Public Costs:** state and federal Aid to Families with Dependent Children (AFDC), Food Stamps and Medicaid only. Other significant costs omitted from this cost estimate include: education/job training, child care, foster care, child protective services for teen mother and/or child, housing and psychological counseling, in addition to the partial loss of mother and child as contributing members of society.

## Citations for Teenage Sexual Behavior in Alaska

1. Alaska Department of Health and Social Services, The State of Adolescent Health in Alaska. 1990 page 33-34.
2. U.S. Department of Health and Human Services. "Sexual Behavior Among High School Students - United States 1990." Chronic Disease and Health Promotion Reprints from the MMWR, 1990 Youth Risk Behavior Survey. 1992 pages 29-33.
3. National Center for Health Statistics, Advance Report Final Natality Statistics, 1990 Monthly Vital Statistics Report, Volume 41 Number 9, Supplement February 25, 1993 page 20.
4. U.S. Department of Health and Human Services. "Selected Behaviors that Increase Risk for HIV Infection Among High School Students - United States 1990. Chronic Disease and Health Promotion Reprints from the MMWR, 1990 Youth Risk Behavior Survey. 1992, page 45.
5. Weeks, Maureen, Three A Day: Children Having Children in Alaska. Senate Advisory Council, Alaska State Legislature, August 1989.
6. Henshaw, Kenney, Scmberg and Van Vort. Teenage Pregnancy in the United States. The Alan Guttmacher Institute. 1989 pages 27-29.
7. Tony Zenk, Memorandum. Bureau of Vital Statistics, Department of Health and Social Services. April 28, 1993.
8. National Center for Health Statistics. Advance Report Final Natality Statistics, 1989, Monthly Vital Statistics Report. Volume 40 Number 8 December 12, 1991 page 18.
9. Michele Hansen, Memorandum, Division of Public Health, Section of Epidemiology. December 30, 1992.
10. Trish Belchring, personal communication with Becky Judd. Alaska Department of Health & Social Services, Division of Public Health, Section of Maternal Child and Family Health. March 5, 1993. Unpublished data from Adolescent Health Survey 1990.
11. Alaska Department of Health and Social Services The State of Adolescent Health in Alaska. 1990 preliminary data, unpublished, page 37.
12. National Research Council, National Academy Press. Cheryl Hayes, editor. Risking the Future: Adolescent Sexuality, Pregnancy and Childbearing. 1987 page 74.
13. Ibid, page 61.
14. Tony Zenk, personal communication with Karen Pearson. Alaska Division of Public Health, Bureau of Vital Statistics, January 29 1993.
15. U.S. Department of Commerce, Bureau of the Census. 1990 U.S. Census.

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## HEALTHY ALASKANS 2000

*Health Promotion and Disease Prevention Objectives for Alaska*



Alaska Department of Health and Social Services  
Theodore A. Mala, MD, MPH, Commissioner

Division of Administrative Services - Planning Section  
Attn: Brad Whistler, DMD, Project Coordinator  
P.O. Box 110650  
Juneau, AK 99811-0650  
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DRAFT

FAMILY PLANNING

Health Objective for the Year 2000: Reduce unplanned pregnancies in Alaska

Indicator	Statewide Baseline	National Baseline	Alaska Objective Year 2000
Reduce pregnancies among girls age 17 and younger per 1,000 girls age 15-17	31 (1985) estimate <sup>(1)</sup>	71.1 (1985)	< 30
Reduce number of births to girls age 15-19 <sup>2</sup> (per 1,000 girls age 15-19)	65.7 (1990) <sup>(4)</sup>	58.1 (1989)	< 30
a) White adolescents	54.2 (1990)		
b) Native adolescents	107.3 (1990)		
Reduce the proportion of unintended pregnancies	No data available	56% (1988)	Reduce by 30%
Reduce the proportion of adolescents who have engaged in sexual intercourse	52% girls&boys by age 15 (1990) <sup>(3)</sup> 73% girls/67% boys by 17 (1990) <sup>(3)</sup>	27% girls/33% boys by age 15 50% girls/66% boys by age 17	35% by age 15 40% by age 17
Increase contraceptive use by sexually active unmarried adolescents	72% (grades 7-12) (1990) <sup>(2)</sup>	78% (1988)	> 30%
Increase the proportion of teens (age 10 through 18) who have discussed human sexuality, including values surrounding sexuality with their parents and/or have received information through another parentally endorsed source, such as school youth or religious programs	43% of 5th - 12th graders received some form of sex education in which human sexuality was discussed (1990) <sup>(2)</sup>	66%	> 70%
Increase the proportion of primary care providers who provide age-appropriate preconception care and counseling	Data not available	Data not available	> 60%
Increase the number of family planning clinics statewide	25 family planning clinics provide "Medical Family Planning"	Data not available	Increase by 25%

STATUS AND CURRENT TRENDS

Pregnancy Rates

Alaska does not keep record of induced or spontaneous abortions. The Guttmacher Institute estimated the Alaska pregnancy rate based on the proportion of abortions obtained by women of the same age in neighboring or similar states. The U.S. teen pregnancy rate in 1985 was 71.1 pregnancies per 1,000 girls age 15-17. During this same time period the Alaska teen pregnancy rate was estimated at 31 pregnancies per 1,000 girls age 15-17. This was an increase from an estimated 65 pregnancies per 1,000 females age 15-17 in 1982. Alaska had the nation's second highest pregnancy rate for 15 - 19 females in 1985. Preg-

nancy estimates were not projected for Black, Hispanic or Alaska Native adolescent girls.<sup>(4)</sup>

Similarly, there is no current information on unintended pregnancies in Alaska. Nationally, it is estimated 56% of all pregnancies in the U.S. are unintended. The Pregnancy Risk Assessment Monitoring System (PRAMS) survey will provide future information on unintended pregnancies in Alaska.

Birth Rates

The 1989 U.S. birth rate for teenaged mothers 15-19 was 58.1 per 1,000. The 1989 birth rate for this age group in Alaska was 55.9 per 1,000. In 1990, the birth rate for teenaged mothers in this age group increased to 65.7 per 1,000. The birth rate for White adolescent, aged 15-19, mothers was 54.2 per 1,000 in 1990 while the rate for Alaska Native mothers in this age group was almost twice that rate, 107.3 per 1,000. The United Nations lists only

## DRAFT

teen countries with rates higher than the Alaska Native teen birth rate. The Alaska teen birth rate has decreased from 93.9 births/1,000 teens age 15-19 in 1970 to 55.9/1,000 in 1988. The white adolescent birth rate has followed this same trend (from a high of 89.4/1000 in 1970 to 42.3/1,000 in 1988) while the Native adolescent birth rate has experienced a slow but steady increase from 98.7/1000 in 1970 through 1987 when the rate was 110.5/1,000 in 1987. The Native adolescent birth rates during 1988, 1989 and 1990 were 104.2, 107.5 and 107.3 per 1,000, respectively. The age specific birth rates for other minority groups are less meaningful in Alaska since these groups comprise a small percentage of the state's population.<sup>(1,2)</sup>

### Infertility

Nationally, infertility affects an estimated 2.4 million married couples. In recent years there has been a great deal of public discussion on infertility as it relates to insurance coverage for procedures for these couples to conceive. Diagnosis and treatment of infertility is costly: in 1987 Americans spent about \$1 billion on infertility related health care expenditures. There is no information available on the health status of Alaskans as it relates to infertility.

### Sexual Activity

According to a statewide junior and senior high school survey, 52% of males and females have engaged in sexual intercourse by 10th grade (age 15-16). Sexual activity increased with age, 67% of the males and 73% of the females reported having had sexual intercourse by 12th grade (age 17-18). Alaska teens report sexual activity rates high above national norms. Among sexually active adolescents, the mean age of first intercourse for males is 13.2 and for females is 14.0. Trend and projection data is not available for Alaska.<sup>(3)</sup>

### Contraception & Sexually Transmitted Disease Protection

Contraception is used "always" or "quite often" by 72% of the 7-12 grade sexually active adolescents according to a statewide junior and senior high school survey. Condoms are used by 51% of the sexually active teenagers as a method of contraception and barrier protection against disease. No trends or projection data is currently available.<sup>(3)</sup>

### Human Sexuality Discussions and Counseling

During the 1989-1990 school year, 43% of 5th-12th graders in the Alaska Public School system received some

form of family life education in which human sexuality is discussed.

No data is collected regarding the extent to which parents or religious programs discuss human sexuality and the values surrounding sexuality. Further information on the practice of preconception care and counseling, in Alaska, is not available.

### Family Planning Clinics

There are twenty-six family planning clinics in Alaska. These include state, municipal, Native and local clinics that provide "Medical Family Planning" services. Currently, the information on the number of women utilizing services at these clinics is not available.

## HEALTH IMPLICATIONS

### Reducing Adolescent Pregnancy/Birth Rates:

The impact of adolescent pregnancy is two fold, affecting both the adolescent mother and the child that is born to this adolescent mother. The adolescent mother is less likely to seek prenatal care and less likely to finish high school. They are more likely to be single, poor isolated and depressed. For the child the main risk is being born too small and with this comes an increase incidence of mental retardation, cerebral palsy, epilepsy and other injuries. These children are also at risk a higher risk for death and injury in infancy and childhood. The children of adolescents are also more like to have problems in school and often become teen parents themselves.

### Unintentional Pregnancies:

An unintentional pregnancy can affect a women by impacting on her health, her family, and their social and economic situation. A women's health is affected by an unintentional pregnancy when the pregnancies occur close together. This does not allow for her body to recover from pregnancy, childbirth and/or breast feeding. Children that are closely spaced often don't have the time and attention that a child whose family has planned and spaced their pregnancies. Unintentional pregnancies will impact a family's monetary resources, for not only the cost of prenatal care, labor and delivery cost, newborn health care, but for the basics of food, shelter and clothing. Adolescents or women that are currently in college or just starting a career can be negatively impacted by an unintentional pregnancy. For those that choose to terminate the pregnancy, the monetary and emotional cost of the unintentional pregnancy can also be a hardship.

## DRAFT

### Infertility:

Infertility can be seen in any age group. Often older couples are thought as being the most effected, but there is an increased rate of infertility in younger women due to the increase of sexually transmitted diseases. Infertility is an emotional life crisis. The couple often experience feelings of helplessness and being out of control of one's life and plans. The couple suffer from a loss of self-esteem, self-confidence, pregnancy experience, genetic continuity, and spontaneous sexual intimacy. Not only do these couples suffer emotional responses but the cost of medical treatment for infertility can be enormously expensive.

### Adolescent Sexual Activity:

Adolescent sexual activity impacts our teens in many ways. A sexual relationship can expose the adolescent to STD's (sexually transmitted diseases), to AIDS, to increase risk of abnormal Pap tests, to unintentional pregnancy, to abortion, and to emotional distress over relationships. Each of these factors can have devastating consequences on a persons life.

### Adolescent Use of Contraception:

The use of contraception in those adolescents that are sexually active would impact the high rate of adolescent pregnancy and the high rate of STD's in the adolescent age group. The consequences of increasing contraception would be a decrease in abortion rate, decrease in the high school drop out rate, a decrease in funding required for public assistance programs, a decrease in infant mortality rates and a decrease in infertility. A substantial savings in all areas that affect an adolescent life (social, emotional, economical, spiritual and physical) could be realized.

### Adolescent Discussion of Human Sexuality:

Discussion of human sexuality with adolescents by a parent or adult allows for the opportunity to cultivate a health based interaction. When human sexuality is presented in a nonjudgmental format, it can be considered as a part of a holistic human development, as is our physical and emotional health. This allows for open communication between parent/adult and adolescent. Open communication between parent and child has been correlated to delayed initiation of sexual activity.

### Preconception Care and Counseling:

Health care before conception may optimize the outcome of a given pregnancy, whereas options may already be limited by the time a woman conceives. Preconception care and counseling can be particularly important in identifying conditions that could dramatically effect a preg-

nancy, such as diabetes mellitus, hypertension and metabolic and inherited disorders. Discussion and identification of behaviors that would impact on a pregnancy can also be identified and addressed, such as drug, alcohol and tobacco use. Preconception counseling can also start regimens, such as the use of prenatal vitamins with folic acid to prevent neurotube defects. Preconception counseling allows for optimum health prior to the pregnancy in order for the pregnant women and infants to experience a higher level of wellness.

### Family Planning Clinic Services:

The impact of increasing family planning clinics is that all of the above concerns can be addressed in family planning clinics. Family planning clinics are an opportune place for preconception care and counseling to occur, providing the benefits described. Discussion of human sexuality is another area that can be done at a family planning clinic, especially when there are questions that other adults are uncomfortable in discussing, this would allow for the beginning for dialogue for adolescents to use when approaching their parents. Family planning clinics can provide information and contraception to adolescents, thus decrease the adolescent pregnancy rate and the rate of STD's in this group.

## RECOMMENDATIONS

- Increase funding to expand family planning services statewide with emphasis on adolescent population
- Implement culturally sensitive, developmentally appropriate K-12 school health curriculum statewide

## DATA NEEDS

- \*Number of unintended pregnancies.
- \*Prevalence of infertility.
- \*Number of primary care providers who provide age appropriate preconception care and counseling.
- \*Number of pregnancy terminations for Alaska residents.
- \*Number of teens who are sexually active and the number using contraception.

## KEY ORGANIZATIONS

Alaska Area Native Health Service  
Alaska Department of Education  
Alaska Department of Health and Social Services  
Division of Family and Youth Services  
Division of Public Health

## DRAFT

Alaska Health Education Consortium  
 Alaska Nurses Association  
 Alaska Nurse Practitioners Association  
 Alaska Public Health Association  
 Alaska Regional Native Health Corporations  
 Alaska State Medical Association  
 Municipality of Anchorage  
 Department of Health and Human Services  
 Planned Parenthood of Alaska  
 Private non-profit agencies  
 U.S. Public Health Service, Region X

## REFERENCES

- 1) Alaska Bureau of Vital Statistics, *Annual Report 1988-1989*, Department of Health and Social Services, July 1992.
- 2) Alaska Bureau of Vital Statistics, *Annual Report: 1990*, Department of Health and Social Services, April 1993.
- 3) Alaska Department of Health and Social Services, *The State of Adolescent Health in Alaska*, May 1990.
- 4) Henshaw, S.K.; Kenney, A.M.; Somberg, et al., *Teenage Pregnancy in the United States: The Scope of the Problem and State Responses*, The Alan Guttmacher Institute, 1989.
- 5) Larson, P.E., *Assessment of HIV/AIDS Prevention Education Programs*, Alaska State Department of Education 1990.
- 6) Zank, A.E.; Skagerberg, V.R., "Vital Statistics for Young Adults in Alaska", *Alaska Vital Signs*, Bureau of Vital Statistics, DHSS, Division of Public Health, Vol. 3, No. 1, 1993.



# ALASKA STATE MEDICAL ASSOCIATION

4107 Laurel Street • Anchorage, Alaska 99508-5334 • (907) 562-2662

February 23, 1994

Representative Cynthia Toohey  
Alaska State Legislature  
P. O. Box V (MS 3100)  
Juneau, AK 99811

Dear Representative Toohey:

On behalf of the Alaska State Medical Association I would like to offer our highest support for your committee's substitute for House Bill #320. Under our current health system, public health has, unfortunately, not been given the emphasis that it deserves. Preventative medicine is good medicine. Your bill will help educate the youth of the state which will hopefully allow them to make healthier decisions when they reach adulthood.

I am strongly supportive of mandated instruction on the human immunodeficiency virus. I recently attended a conference in San Francisco and was made aware that the incidence of HIV infections is increasing most rapidly amongst the teenage population.

Thank you for this bill. If I can be of any assistance to you in passage of the "Healthy Students Act" do not hesitate to contact me.

Sincerely yours,

Donald R. Lehmann, M.D., A.B.F.P.  
President, Alaska State Medical Association  
Chairman, Legislative Affairs Committee

DRL:bj

686



**ALASKA HEMOPHILIA ASSOCIATION**

2810 Aspen Drive, Anchorage, Alaska 99517  
FAX or PHONE (907) 243-4045

3/1/94

Cynthia Toohey  
Room 104 Capitol  
Juneau, AK 99807

Dear Cynthia,

I wanted to express appreciation for your support for HIV education and the "Healthy Student Bill" you are co-sponsoring. As you are probably aware, HIV has had a tremendous impact on the entire hemophilia community, both through the infection of the majority of hemophiliacs who used blood products before 1985 and through the ten-fold increase in the cost of the newer HIV-safe blood products since 1985. Our collective experiences have made us strong supporters of HIV education and health education in general.

Our organization recently received funding from Maternal and Child Health for a part-time salary that includes HIV risk reduction and instituting a program for comprehensive hemophilia care in Alaska. Let me know if there is anything I can do to lend support to your efforts.

Sincerely

Louise Cobb, Director



# SENATOR LOREN LEMAN

Northwest Anchorage

716 W 4th Ave, Ste 540, Anchorage AK 99501 258-8189

Session: State Capitol, Juneau AK 99801 465-2095

March 17, 1994

Jimmy and Beverly Hart  
PO Box 1826  
Soldotna AK 99669

Dear Jimmy and Beverly,

Thank you for your public opinion message regarding HB 320, mandating sex education in Alaska's government schools.

I agree with you. Children should be educated regarding the consequences of sexual activity outside of marriage. However, the decision about content, as well as where and when they receive this information must remain in the control of parents. Above all, children should not be unreasonably subjected to embarrassment and humiliation of learning sexual information in mixed company.

The book, "*Asking About Sex and Growing Up*" by Joanna Cole was recently retained by the Anchorage School Board in elementary school libraries. Our children do not need this book. It contains many "how to's" that are objectionable. In addition, it assures children that sexual attraction to teachers and relatives is okay. I encourage you to contact your school librarian and school board members to register your objection to the placement of this book.

HB 320 is currently in the House Finance Committee and has not yet been scheduled for a hearing.

Sincerely,

A handwritten signature in cursive script that reads "Loren Lemman".

Loren Lemman  
Senator

LL/cl



Official Business

# Alaska State Legislature

## HOUSE OF REPRESENTATIVES

REPRESENTATIVE CYNTHIA TOOHEY  
DISTRICT 13

State Capitol  
Juneau, AK 99801-1182

### MEMORANDUM

DATE: April 13, 1994

TO: Senator Loren, Chair  
Senate State Affairs Committee

FROM: Representative Cynthia Toohey *CT*

RE: House Bill 320, "An Act relating to public school health personal safety education"

---

I respectfully request that the above-referenced bill be scheduled for a hearing in your committee at your earliest convenience.

Attached is:

- A sectional analysis of the most current version, CSHB320 (HES)
- Current fiscal note
- Current departmental position paper
- Pertinent background material

Please give Marveen or me a call at 6820 if you have any questions. Thank you.

HB320



April 25, 1994

Senator Loren Leman  
Chair, State Affairs  
State Capital, Room 113  
Juneau, AK 99801-1182

P.O. Box 100563, Anchorage, Alaska 99510

*Good reasons to  
take time to consider  
this bill. J  
APR 28 1994 4/29/94*

Dear Senator Leman:

On behalf of the Alaska Health Education Consortium (AHEC) we would like to provide some comments on CS HB 320 "An Act relating to public school health personal safety education" as it is written. AHEC is a statewide agency made up of health educators who work for private nonprofits, native health corporations, school districts, state and municipal health and education departments. Most of our efforts focus on prevention, including encouraging comprehensive school health education.

Our three main concerns with the HIV mandate are that the fiscal note is inadequate, there are no criteria to monitor if the bill is being implemented, and it doesn't define any outcome or amount of education that needs to occur. The money is minimal to provide adequate training to all school districts. Training is important to provide sufficient information and comfort levels in order for teachers to provide effective HIV education. The fiscal note does not reflect costs that will be incurred by local school districts at a time when their budgets are being reduced.

Second, an outcome of this mandate should state what educational requirements need to be met. We would suggest page 2, lines 14-17 be rewritten to as follows. "A school district shall conduct a program in health education that includes instruction and assessment in HIV/AIDS to assure that students have acquired the necessary information to avoid infection. Instruction under this subsection must be appropriate to the child's age and emphasize appropriate behavior."

Third, there is no mechanism in the bill to monitor if districts are in compliance with this mandate. AHEC's suggestion is to require schools to report implementation back to their communities and the Department of Education through AS 14.03.120 Education Planning, (School Report Card Legislation).

We prefer that HIV education be taught within a planned and sequential K-12 comprehensive school health program. However, we support this bill with the suggested amendments. Thank you for this opportunity to share our concerns on this important piece of legislation.

Sincerely,

Kris Larson  
President



May 5, 1994

Senator Loren Lemar  
Senate - Alaska State Capitol  
Room 113  
Juneau, AK 99801-1182

Interdepartmental Mail Stop: 3100

Dear Senator Lemar;

As Chair of the State Affairs Committee, you have the opportunity to schedule a Senate hearing for HB320 (The "Healthy Students" Bill.)

The American Cancer Society, Alaska Division, has recommended the inclusion of Tobacco Prevention Education into this bill and we would hope to see State level action on Comprehensive School Health Education.

It is with confidence in the hearing process, that we hope to see the eventual passage of a bill that will address the health issues curriculum in Alaskan schools. Without discussion, everyone loses. With the hearings, the awareness of Prevention Education as a vital component will increase.

Thank you for your attention to this concern.

Sincerely,

A handwritten signature in cursive script that reads "Jill Gates".

Jill Gates  
Prevention Programs Director

## Position Paper: Department of Education

Division Educational Program Support Bill Number C.S.H.B.320

Bill Title An Act relating to public school health personal safety education

Sponsor Representative Toohy

Position Statement: Explain briefly what the bill does, its impacts and Department's position.

### What the bill does:

This bill would amend existing law regarding health and safety education in public schools in three ways. First, it would require the school boards of each school district and regional educational attendance area to establish a health education curriculum advisory committee. Secondly, it would repeal the existing AS 14.30.360 and reenact this section to a) require instruction in human immunodeficiency virus and acquired immune deficiency syndrome, and b) encourage a district in the public school system to conduct a K-12 comprehensive health education program. In addition, it would increase the number and scope of the topics that would be encouraged as a part of this program. Finally, it would add a definitions section that includes definitions for the terms "family health," "health and personal safety education," "pregnancy prevention," and "reproductive health."

### Impacts and Department's position:

The Department recognizes the importance of a structured health education curriculum that will provide students with the information and skills they need to make health promoting choices throughout their lifetime. The Department agrees that it is important for students to be instructed in HIV prevention and other important health risks of this era. However, the decisions about what the content of curriculum should be, and the age at which that content is appropriately taught, and its level of emphasis are best decided by the local school boards in consultation with parents, local health providers and community members. For these reasons, the Department of Education continues to oppose imposition of any kind of state level curriculum mandates.

The Department does support the requirement for establishment of a health education curriculum advisory committee for the district. This practice will assure the district receives the best advice from local health experts, parents, and other community members. The language describing the role and operation of this committee should impose minimal additional expense to the school districts.

APPROVED:

Director Vince Barry DIVISION Educational Program Support

Signature [Signature] Date 2-24-94

Commissioner/Deputy Jerry Covey/Mike Maher

Signature [Signature] Date 2-24-94



Official Business

# Alaska State Legislature

## SPONSOR STATEMENT

State Capitol  
Juneau, AK 99801-1182

### HOUSE BILL 320

#### "An Act relating to public school health personal safety education"

The overall health of our youth should be a matter of concern for every Alaskan. Teen alcoholism, pregnancy, drug abuse, suicide, injuries, and the alarming rise in the incidence of HIV/AIDS in children are being addressed in a number of ways, but prevention is the most effective, least expensive approach to most of these concerns. We all need to work together on this issue.

A vital part of any health care reform plan in Alaska or in this nation is prevention. If we do not promote healthier lifestyles among our youth, health care costs will continue to escalate.

House Bill 320 recommends comprehensive health education in the public schools and mandates HIV/AIDS education. There is an opt-out section for parents who prefer to teach their children themselves. Thirty-nine states either mandate, in statute or policy, HIV/AIDS education. After 13 years of research at a cost of \$10 billion, there is still no cure for HIV/AIDS. The Institute of National Health has said there may be no cure. They say the **only** answer may be prevention.

The HIV/AIDS virus is not a remote disease. It is present in most areas of our state and 25% of people with AIDS in Alaska contracted it in their teens. Confirmed cases of AIDS have been reported in the following census areas: North Slope, Nome, Wade Hampton, Bethel, Fairbanks, Mat-Su, Valdez-Cordova, Kenai Peninsula, Kodiak, Dillingham, Anchorage, Sitka, Juneau, Wrangell-Petersburg, Ketchikan Gateway, and Prince of Wales-Outer Ketchikan. This does not include those who are HIV positive since HIV is not a reportable disease in Alaska. Teens and women are the fastest growing group of individuals who have AIDS. Due to its deadliness, it is imperative that we arm our most precious resource, the children of Alaska, with enough information so that they can enjoy long healthy lives.

Among those who support HB320 are the Alaska State Medical Association, the Alaska Hemophilia Association, the Alaska Native Health Board, the Alaska Nurses Association, NEA Alaska, and Alaskans Living with HIV. It has a \$39.4K fiscal note. It costs an average of \$119,000 for one person's lifetime medical expenses to treat AIDS. I urge your support and co-sponsorship of this legislation.

**SENATORIAL ALERT ON HIV/AIDS IN ALASKA**

**YOUNG PEOPLE ARE BECOMING INFECTED, YOUNG PEOPLE ARE DYING.**

**THE AIDS EPIDEMIC HAS NOW CLAIMED MORE AMERICAN LIVES THAN THE KOREAN, VIETNAM AND PERSIAN GULF WARS COMBINED. THE CENTERS FOR DISEASE CONTROL (CDC) ESTIMATES THAT BY THE END OF NEXT YEAR, 285,000 TO 340,000 AMERICANS WILL HAVE DIED OF AIDS -RELATED COMPLICATIONS. ANOTHER 1-2 MILLION AMERICANS ARE INFECTED WITH HIV, AND 40,000 TO 50,000 MORE WILL BECOME INFECTED THIS YEAR.**

**LIVES HAVE BEEN NEEDLESSLY LOST BECAUSE OUR COUNTRY ALLOWED SOCIETAL UNEASE WITH SEXUAL ISSUES TO PREVENT IT FROM TAKING TO THE AIRWAVES WITH AIDS INFORMATION.**

**FACT: OF ALL ALASKANS CONFIRMED WITH FULL BLOWN AIDS, 25% CONTRACTED HIV IN THEIR TEENS.**

**FACT: HALF OF ALL NEW HIV INFECTIONS OCCUR IN PEOPLE UNDER THE AGE OF 25 YEARS.**

**FACT: BY AGE 19, 75% OF WOMEN AND 86% OF MEN HAVE HAD INTERCOURSE.**

**FACT: OVERWHELMING NUMBERS OF TEENS CONTINUE TO ENGAGE IN UNPROTECTED SEXUAL ACTIVITIES, DESPITE THE WARNINGS.**

**FACT: THE CENTER FOR DISEASE CONTROL NOW TELL US THAT TEENS AND WOMEN ARE THE FASTEST GROWING GROUPS IN THIS EPIDEMIC.**

**FACT: THE WORLD HEALTH ORGANIZATION, IN A COMPREHENSIVE INQUIRY THAT INVOLVED 19 STUDIES IN SIX COUNTRIES, INCLUDING THE UNITED STATES, FOUND ON THE QUESTION OF SEX EDUCATION THAT ADDRESSED CONDOM USE THAT IN NO STUDY WAS THERE EVIDENCE OF SEX EDUCATION LEADING TO EARLIER OR INCREASED SEXUAL ACTIVITY IN THE YOUNG PEOPLE WHO WERE EXPOSED TO IT. IF FACT, THERE WAS A DECREASE IN SEXUAL ACTIVITY.**

**FACT: THE CENTER FOR DISEASE CONTROL NOW TELLS US THAT AIDS IS THE #1 KILLER FOR MEN BETWEEN THE AGES OF 25 AND 44. AIDS IS**

NOW ALSO THE 4TH LEADING CAUSE OF DEATH IN WOMEN IN THE SAME AGE GROUP.

FACT: IT COSTS \$102,000 TO TREAT ONE AIDS PATIENT ON AVERAGE. FOR APPROXIMATELY \$250,000 WE CAN INITIATE PREVENTION EDUCATION COURSES THROUGHOUT ALASKA FOR OUR YOUNG PEOPLE TO TEACH THEM HOW TO PROTECT THEMSELVES IN THE MIDDLE OF THIS RAGING, OUT-OF-CONTROL EPIDEMIC.

ALASKA IS SO PROUD OF HER RESOURCES. LET US NOT FORGET OUR MOST IMPORTANT RESOURCE: OUR YOUNG PEOPLE. WHO IS GOING TO COME FORWARD WITH THE LEADERSHIP NEEDED TO IMPLEMENT THE "HEALTHY STUDENT" BILL TO ENSURE THAT ALL ALASKA'S CHILDREN HAVE THE RIGHT TO KNOW HOW TO PROTECT THEMSELVES?

PRESENTLY HIV/AIDS EDUCATION IS MANDATORY IN 33 STATES IN AMERICA AND 15 STATES HIGHLY RECOMMEND IT.

THIS DISEASE COULD HAVE BEEN STOPPED. THIS DISEASE IS TOTALLY PREVENTABLE. IT IS OUR MORAL RESPONSIBILITY TO ENSURE THAT EVERY YOUNG PERSON IN ALASKA IS PROPERLY EDUCATED ON THIS ISSUE. IF WE DO NOT, THEN WE MUST SHOULDER THE RESPONSIBILITY FOR FURTHER INFECTION AND DEATH OF YOUNG PEOPLE.

IT HAS BEEN SAID THAT HISTORY WILL JUDGE HARSHLY THOSE ENTRUSTED WITH DECIDING WHAT COULD HAVE BEEN DONE... BUT WAS NOT DONE... TO SLOW THE SPREAD OF AIDS. THE AIDS EPIDEMIC IS NOT SOMEONE ELSE'S PROBLEM. IT IS ABOUT OUR FAMILIES AND OUR CHILDREN.

WHO CARES ABOUT YOUR CHILD CONTRACTING HIV/AIDS?  
WE DO...

ALASKANS LIVING WITH HIV (ALHIV)  
174 SOUTH FRANKLIN ST. #208  
TEL.# 463-5688 FAX# 463-3180

STATE OF ALASKA  
DEPARTMENT OF HEALTH & SOCIAL SERVICES  
DIVISION OF PUBLIC HEALTH  
SECTION OF EPIDEMIOLOGY

**\*\*PUBLIC SUPPORT FOR AIDS EDUCATION\*\***

---

	1992
Should education about AIDS be taught in schools within comprehensive health education? Percent responding yes.	96%
Should comprehensive health education include instruction on condoms as a preventative measure? Percent responding yes.	83%

---

ALASKA DEPARTMENT OF HEALTH & SOCIAL SERVICES  
THE STATE OF ADOLESCENT HEALTH IN ALASKA, MAY 1990

In the 1988-89 school year, a survey of 5,458 students indicated that 52% of 10th graders surveyed have had intercourse. By 12th grade, 73% of the females and 67% of the males reported they have had intercourse.

SINCE SEC. 5 IS REPEALED AND REENACTED,  
THIS COPY HAS BEEN HAND-UNDERLINED TO  
INDICATE NEW TEXT, SO MEMBERS CAN  
MORE EASILY DISTINGUISH BETWEEN WHAT  
CURRENTLY EXISTS IN STATUTE AND WHAT  
IS PROPOSED.

8-LS12551R

CS FOR HOUSE BILL NO. 320(HES)

IN THE LEGISLATURE OF THE STATE OF ALASKA

EIGHTEENTH LEGISLATURE - SECOND SESSION

BY THE HOUSE HEALTH, EDUCATION AND SOCIAL SERVICES COMMITTEE

Offered: 3/2/94

Referred: Finance

Sponsor(s): REPRESENTATIVES TOOHEY, Hudson, Brice, Bunde, Finkelstein, Nordlund, Olberg,  
Porter, Sitton, B.Davis

A BILL

FOR AN ACT ENTITLED

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

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

3 \* Section 1. SHORT TITLE. This Act may be known as the "Healthy Students Act."

4 \* Sec. 2. PURPOSE. The purpose of this Act is to foster the development and  
5 dissemination of educational activities and materials that will assist students, teachers,  
6 administrators, and parents in the perception, appreciation, and understanding of health  
7 principles and problems, and adoption of responsible behavior.

8 \* Sec. 3. AS 14.08.115 is amended by adding a new subsection to read:

9 (c) A regional school board shall establish a health education curriculum  
10 advisory committee in the regional educational attendance area, and by regulation shall  
11 prescribe its manner of selection and organization. Members of the advisory  
12 committee required under this subsection may include residents of the district with  
13 expertise in public safety, mental health, alcohol and drug abuse, and public health.  
14 A meeting of a health education curriculum advisory committee may be

1 teleconferenced. A health education curriculum advisory committee shall advise the  
2 regional school board on the health education curriculum at schools in the regional  
3 educational attendance area.

4 \* Sec. 4. AS 14.12.035 is amended to read:

5 Sec. 14.12.035. ADVISORY SCHOOL BOARDS AND COMMITTEES IN  
6 BOROUGH SCHOOL DISTRICTS. A borough school district board shall establish  
7 a health education curriculum advisory committee and may establish other  
8 advisory school boards or committees, and by regulation shall prescribe their manner  
9 of selection, organization, powers, and duties. Members of the health education  
10 curriculum advisory committee may include residents of the district with expertise  
11 in public safety, mental health, alcohol and drug abuse, and public health. A  
12 health education curriculum advisory committee meeting may be teleconferenced.

13 \* Sec. 5. AS 14.30.360 is repealed and reenacted to read:

14 Sec. 14.30.360. CURRICULUM. (a) A school district shall conduct a  
15 program in health education that includes instruction in human immunodeficiency virus  
16 and acquired immune deficiency syndrome. Instruction under this subsection must be  
17 appropriate to the child's age and emphasize appropriate behavior.

18 (b) A district in the state public school system shall be encouraged to initiate  
19 and conduct a program in comprehensive health education for kindergarten through  
20 grade 12. The program should be appropriate to the child's age, emphasize appropriate  
21 behavior, and contain instruction in physical health and personal safety including

22 (1) alcohol, tobacco, and substance abuse and fetal alcohol syndrome  
23 education;

24 (2) first aid, including cardiopulmonary resuscitation (CPR);

25 (3) human growth and development, including reproductive health,  
26 pregnancy prevention, prevention and control of diseases, including sexually  
27 transmitted diseases;

28 (4) mental and emotional health, including suicide prevention;

29 (5) cancer prevention and early detection, nutrition, dental health,  
30 family health, and environmental health;

31 (6) the identification and prevention of child abuse, child abduction,

1 neglect, and sexual abuse, and domestic violence; and

2 (7) appropriate use of health services.

3 (c) A program under (a) or (b) of this section

4 (1) may include training, support groups, and pertinent literature  
5 designed to assist parents and other members of the community in the use of available  
6 community resources, and in participating in health and personal safety education; and

7 (2) must include a method of notifying parents of students of the con-  
8 tent of instructional materials used in a program described under (a) or (b)(3) of this  
9 section and of the parents' option to exempt their child from the instruction; a district  
10 shall use procedures to provide that students exempted from the program are not  
11 embarrassed by the exemption.

12 (d) The state board shall establish guidelines for a comprehensive health and  
13 personal safety education program. Personal safety guidelines shall be developed in  
14 consultation with the Council on Domestic Violence and Sexual Assault. Upon  
15 request, the Department of Education, the Department of Public Safety, the Department  
16 of Health and Social Services, and the Council on Domestic Violence and Sexual  
17 Assault shall provide technical assistance to school districts in the development of  
18 personal safety curricula. A school health and personal safety education specialist  
19 position shall be established and funded in the department to coordinate the program  
20 statewide. Adequate funds to enable curriculum and resource development, adequate  
21 consultation to school districts, and a program of teacher training in health and  
22 personal safety education shall be provided.

23 \* Sec. 6. AS 14.30.360 is amended by adding a new subsection to read:

24 (c) In this section,

25 (1) "family health" includes

26 (A) an understanding of the physical, mental, emotional, social,  
27 economic, and psychological aspects of close personal relationships and an  
28 understanding of the physiological, psychological, and cultural foundations of  
29 human development;

30 (B) the development of responsible personal values and  
31 behavior and the establishing of a strong family life for students in the future,

1 with emphasis on the responsibilities of parenting;

2 (C) knowledge of the law relating to the sexual conduct of  
3 minors and sexual abuse of minors, including criminal sexual conduct;

4 (2) "health and personal safety education" includes health education in  
5 a school setting that is planned and carried out with the purpose of maintaining,  
6 reinforcing, or enhancing the health, health-related skills, and health attitudes and  
7 practices of children and youth that are conducive to their good health and that  
8 promote wellness, health maintenance, and disease prevention; it includes age-  
9 appropriate, sequential instruction in health either as part of an existing course or as  
10 a special course;

11 (3) "pregnancy prevention" includes

12 (A) abstaining from sexual activity until marriage;

13 (B) skills to enable students to resist peer pressure and abstain  
14 from sexual activity;

15 (C) methods of contraception, and the risks and benefits of each  
16 method;

17 (4) "reproductive health" includes human physiology, conception,  
18 prenatal care and development, fetal alcohol syndrome, childbirth, and postnatal care.

19 \* Sec. 7. TRANSITION. A city or borough school district or a regional educational  
20 attendance area should begin development of a health education curriculum described in this  
21 Act by July 1, 1994, and shall have in place a program of health education regarding human  
22 immunodeficiency virus and acquired immune deficiency syndrome that is appropriate to a  
23 child's age and that emphasizes appropriate behavior as required by this Act by August 1,  
24 1996.

DIVISION OF LEGAL SERVICES

LEGISLATIVE AFFAIRS AGENCY  
STATE OF ALASKA

907) 465-3667 or 465-2450  
FAX (907) 465-2029  
Mail Stop 3101

130 Seward Street, Suite 409  
Juneau, Alaska 99801-2105

MEMORANDUM

February 23, 1994

SUBJECT: Sectional Summary of HB 320 (Hes)

TC: Representative Cynthia Tooney

FROM: Michael F. Ford *M. F.*  
Legislative Counsel

You have requested a sectional summary of the above described bill.

As a preliminary matter, note that a sectional summary of a bill should not be considered an authoritative interpretation of the bill and the bill itself is the best statement of its contents. If you would like an interpretation of the bill as it may apply to a particular set of circumstances, please advise.

Section 1. Short title.

Section 2. Purpose section.

Section 3. Requires a school board in a regional educational attendance area to establish a health education curriculum advisory committee. Allows a meeting to be teleconferenced. Provides that the committee may include certain residents of the district and that the committee will advise the school board on the health education curriculum at schools in the community in which the committee is established.

Section 4. Requires school boards in borough school districts to establish a health education advisory committee. Provides that the committee may include certain residents of the district.

Section 5. Establishes specific mandatory and optional elements in a health education program in the public school system. Requires the state Board of Education to establish health education personal safety guidelines. Requires that a school health and personal safety education specialist position be established in the Department of Education.

Representative Cynthia Toohy  
February 23, 1994  
Page 2

Section 6. Adds definitions of the terms "family health," "health and personal safety education," "pregnancy prevention," and "reproductive health".

Section 7. Transition section.

MFF:mi:pl  
94-037.mai

# FISCAL NOTE

STATE OF ALASKA  
1994 LEGISLATIVE SESSION

BILL NO. CSHB 320

Revision Date: \_\_\_\_\_ Dept. Affected: EDUCATION  
 Title: An Act relating to public school health personal BRU: Educational Program Support  
safety education. Component: Basic Education and Instructional  
Improvement

Sponsor: Representative Tooney  
 Requestor: Representative Tohey COMPONENT SERIAL NO. 171

**Expenditures/Revenues:** (Thousands of Dollars)

OPERATING	FY95	FY96	FY97	FY98	FY99	FY00
PERSONAL SERVICES	0.0	0.0	0.0	0.0	0.0	0.0
TRAVEL	0.0	0.0	0.0	0.0	0.0	0.0
CONTRACTUAL	38.4	39.6	40.7	42.	43.2	44.5
SUPPLIES	1.0	1.0	1.1	1.1	1.1	1.2
EQUIPMENT	0.0	0.0	0.0	0.0	0.0	0.0
LAND & STRUCTURES						
GRANTS, CLAIMS	0.0	0.0	0.0	0.0	0.0	0.0
MISCELLANECUS						
<b>TOTAL OPERATING</b>	<b>39.4</b>	<b>40.6</b>	<b>41.8</b>	<b>43.1</b>	<b>44.3</b>	<b>45.7</b>

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

REVENUE FUND SOURCE:						
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**FUNDING:** (Thousands of Dollars)

1002 Federal Receipts						
1003 GF Match						
1004 GF	39.4	40.6	41.8	43.1	44.3	45.7
1005 GF/Program Receipts						
1006 GF/MHTIA						
Other:						
<b>TOTAL</b>	<b>39.4</b>	<b>40.6</b>	<b>41.8</b>	<b>43.1</b>	<b>44.3</b>	<b>45.7</b>

**POSITIONS:**

FULL-TIME	0.0	0.0	0.0	0.0	0.0	0.0
PART-TIME						
TEMPORARY						

Estimate of current year (FY94) impact: \$ \_\_\_\_\_

ANALYSIS: (Attach a separate page if necessary)

(SEE ATTACHED)

Prepared by: Helen Mehrkens, Health Promotion Specialist

Phone: 465-8730

Division: Educational Program Support

Date: 23-Feb-94

Approved by Commissioner: 

Date: 2-24-94

Agency: Department of Education

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For further distribution information call the Governor's Legislative Office

Narrative Outline - Proposed Fiscal Note for C.S.H.B.320

Year 1:

	<u>Amount</u>	<u>Description</u>
<i>Personal Services</i>	0	Assumes that no monitoring of state mandates would occur, and that any technical assistance could be provided through the assistance of the currently funded cooperative agreement with Division of Adolescent and School Health, Centers For Disease Control and Prevention (CDC.)
<i>Travel</i>	0	Assumes that current level of training and technical assistance to local districts would be maintained through use of CDC funds.
<i>Contractual</i>	38,400.0	Contracts 7,000. Academy Training of Trainers staff costs - Fbks, Anc. & Jnu. 17,000. Training videos - purchase rights for use by districts 8,400. Presenter/district packets for ACSA or AASB meeting 5,000. Small pamphlet developed for district advisory committee use
<i>Supplies</i>	1.0	Supplies
<i>Equipment</i>	0	None
<i>Grants, Claims</i>	0	This assumes that districts would pick up all training costs for their staff. These costs are not known to the Department. A limited survey among seven of the largest districts yielded an estimated total of \$262,400 for a K-12 requirement to pay for substitute time, curriculum development, materials purchase and limited travel costs. The amount for the bill as written is not known. In addition, it would cost districts an estimated \$54,600. to send their local trainer(s) to the Academy Training of Trainers listed above.
<i>Total Operating</i>	39,400.0	= Year 1

THIS WAS  
BROUGHT  
ON K-12  
APPROX

Changes:

Year 2	3% inflation included
Year 3	3% inflation
Year 4	3% inflation
Year 5	3% inflation

A.S.A.P.**Americans for a Sound AIDS/HIV Policy**

P.O. Box 17433 • Washington, D.C. 20041 • 703/471-7350

FAX TRANSMISSION

TO: DeborahSenator Leman's officeFAX #: 907-465-3810DATE: 3/31/94# OF PAGES (including this sheet): 5FROM: ShepherdMESSAGE: Please call Shepherd to  
go over comments.(pam)If you do not receive a complete transmission please  
call us at 703/471-7350.

Our telecopy number is: 703/471-8409

# SENATOR LOREN LEMAN'S OFFICE

TELECOPIER COVER SHEET  
 State Capitol, Juneau, Alaska 99801  
 907-465-2095 (office) 907-465-3810 (fax)

ATTN: Shepherd FAX: \_\_\_\_\_  
 OFFICE: ASAP PHONE: \_\_\_\_\_  
 FROM: Debra DATE/TIME: 3/30 12noon  
 COMMENTS: Thanks for your comments!  
Hugs & kisses to Will!

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NUMBER OF PAGES (including cover sheet): 6

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

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

3 \* Section 1. SHORT TITLE. This Act may be known as the "Healthy Students Act."

4 \* Sec. 2. PURPOSE. The purpose of this Act is to foster the development and  
 5 dissemination of educational activities and materials that will assist students, teachers,  
 6 administrators, and parents in the perception, appreciation, and understanding of health  
 7 principles and problems, and adoption of responsible behavior.

8 \* Sec. 3. AS 14.08.115 is amended by adding a new subsection to read:

9 (c) A regional school board shall establish a health education curriculum  
 10 advisory committee in the regional educational attendance area, and by regulation shall  
 11 prescribe its manner of selection and organization. Members of the advisory  
 12 committee required under this subsection may include residents of the district with  
 13 expertise in public safety, mental health, alcohol and drug abuse, and public health.  
 14 *The committee must have a majority of parents.*  
 A meeting of a health education curriculum advisory committee may be

SOMETHING IS MISSING HERE

1 teleconferenced. A health education curriculum advisory committee shall advise the  
2 regional school board on the health education curriculum at schools in the regional  
3 educational attendance area.

4 \* Sec. 4. AS 14.12.035 is amended to read:

5 Sec. 14.12.035. ADVISORY SCHOOL BOARDS AND COMMITTEES IN  
6 BOROUGH SCHOOL DISTRICTS. A borough school district board shall establish  
7 a health education curriculum advisory committee and may establish other  
8 advisory school boards or committees, and by regulation shall prescribe their manner  
9 of selection, organization, powers, and duties. Members of the health education  
10 curriculum advisory committee <sup>shall</sup> may include residents of the district with expertise  
11 in public safety, mental health, alcohol and drug abuse, and public health. <sup>as well as parents of students</sup> A <sup>affected by</sup>  
12 health education curriculum advisory committee meeting may be teleconferenced. <sup>committee</sup>  
<sup>decisions.</sup>

13 \* Sec. 5. AS 14.30.360 is repealed and reenacted to read:

14 Sec. 14.30.360. CURRICULUM. (a) A school district shall conduct a  
15 program in health education that includes instruction in human immunodeficiency virus  
16 and acquired immune deficiency syndrome. Instruction under this subsection must be  
17 appropriate to the child's age and emphasize appropriate behavior.

18 (b) A district in the state public school system shall be encouraged to initiate  
19 and conduct a program in comprehensive health education for kindergarten through  
20 grade 12. The program should be appropriate to the child's age, emphasize appropriate  
21 behavior, and contain instruction in physical health and personal safety in

22 (1) alcohol, tobacco, and substance abuse and fetal alcohol syndrome  
23 education;

24 (2) first aid, including cardiopulmonary resuscitation (CPR);

25 (3) human growth and development, including reproductive health, <sup>stressing</sup>  
26 <sup>abstinence in</sup> pregnancy prevention, <sup>and in</sup> prevention and control of diseases, including sexually  
27 transmitted diseases;

28 (4) mental and emotional health, including suicide prevention;

29 (5) cancer prevention and early detection, nutrition, dental health,  
30 family health, and environmental health;

31 (6) the identification and prevention of child abuse, child abduction,

*as well as parents of students affected by committee decisions.*

*A majority of parents*

*abstinence in*

MISSING SECTION, CONT.

1 neglect, and sexual abuse, and domestic violence; and

2 (7) appropriate use of health services.

3 (c) A program under (a) or (b) of this section

4 (1) may include training, support groups, and pertinent literature  
5 designed to assist parents and other members of the community in the use of available  
6 community resources, and in participating in health and personal safety education; and

7 (2) must include a method of notifying parents of students of the con-  
8 tent of instructional materials used in a program described under (a) or (b)(3) of this  
9 section and of the parents' option to exempt their child from the instruction; a district  
10 shall use procedures to provide that students exempted from the program are not  
11 embarrassed by the exemption.

12 (d) The state board shall establish guidelines for a comprehensive health and  
13 personal safety education program. Personal safety guidelines shall be developed in  
14 consultation with the Council on Domestic Violence and Sexual Assault. Upon  
15 request, the Department of Education, the Department of Public Safety, the Department  
16 of Health and Social Services, and the Council on Domestic Violence and Sexual  
17 Assault shall provide technical assistance to school districts in the development of  
18 personal safety curricula. A school health and personal safety education specialist  
19 position shall be established and funded in the department to coordinate the program  
20 statewide. Adequate funds to enable curriculum and resource development, adequate  
21 consultation to school districts, and a program of teacher training in health and  
22 personal safety education shall be provided.

23 \* Sec. 6. AS 14.30.360 is amended by adding a new subsection to read:

24 (c) In this section,

25 (1) "family health" includes

26 (A) an understanding of the physical, mental, emotional, social,  
27 economic, and psychological aspects of close personal relationships and an  
28 understanding of the physiological, psychological, and cultural foundations of  
29 human development;

30 (B) the development of responsible personal values and  
31 behavior and the establishing of a strong family life for students in the future,

1 with emphasis on the responsibilities of parenting; *articulating the*  
 2 *benefits of having children within marriage.*  
 3 (C) knowledge of the law relating to the sexual conduct of  
 minors and sexual abuse of minors, including criminal sexual conduct;

4 (2) "health and personal safety education" includes health education in  
 5 a school setting that is planned and carried out with the purpose of maintaining,  
 6 reinforcing, or enhancing the health, health-related skills, and health attitudes and  
 7 practices of children and youth that are conducive to their good health and that  
 8 promote wellness, health maintenance, and disease prevention; It includes age-  
 9 appropriate, sequential instruction in health either as part of an existing course or as  
 10 a special course;

11 (3) "pregnancy prevention" includes

12 (A) *emphasizing* abstaining from sexual activity until marriage;

13 (B) skills to enable students to resist peer pressure and abstain  
 14 from sexual activity;

15 (C) methods of contraception, and the risks and benefits of each  
 16 method;

17 (4) "reproductive health" includes human physiology, conception,  
 18 prenatal care and development, fetal alcohol syndrome, childbirth, and postnatal care.

19 " Sec. 7. TRANSITION. A city or borough school district or a regional educational  
 20 attendance area should begin development of a health education curriculum described in this  
 21 Act by July 1, 1994, and shall have in place a program of health education regarding human  
 22 immunodeficiency virus and acquired immune deficiency syndrome that is appropriate to a  
 23 child's age and that emphasizes appropriate behavior as required by this Act by August 1,  
 24 1996.



Senate Committee On  
State Affairs

Wed. 4/13

DL-

please pull all floor  
amendments offered by Rep.  
Leman on the floor of the  
House (17<sup>th</sup> leg.) → 1991 Session +  
1992 Session

to HB 7, Boyer's ex  
education bill.

\_CSHB 7(FIN)\_

Amendment No. 1 by Barnes:

Page 2, line 17:

Delete "shall"  
Insert "may"

Page 3, lines 10 - 12:

Delete "A school health and personal safety education specialist position shall be established and funded in the department to coordinate the program statewide."

Representative Barnes moved and asked unanimous consent that Amendment No. 1 be adopted.

Objection was heard.

Representative Barnes moved and asked unanimous consent that Amendment No. 1 be withdrawn. There being no objection, it was so ordered.

Revised Amendment No. 1 by Barnes:

Page 2, line 17:

Delete "shall"  
Insert "may"

Page 3, lines 10 - 12:

Delete "A school health and personal safety education specialist position shall be established and funded in the department to coordinate the program statewide."

Page 4, line 15 after "district":

Delete "shall"  
Insert "may"

Page 4, line 16 after "and":

Delete "shall"  
Insert "may"

Representative Barnes moved and asked unanimous consent that

Revised Amendment No. 1 be adopted.

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Representative Boyer objected.

Representative Boyer moved and asked unanimous consent that Revised Amendment No. 1 be divided.

The Speaker ruled the question was divisible.

Representative Barnes objected.

The question being: "Shall Revised Amendment No. 1 be divided?" The roll was taken with the following result:

CSHB 7 (FIN)  
Second Reading  
Revised Amendment No. 1  
Divide Amendment

Yeas: 25 Boyer, Choquette, Davidson,  
B.Davis, C.Davis, Donley, Ellis,  
Finkelstein, Foster, Gruenberg,  
Grussendorf, Hudson, Ivan, Jacko,  
Koponen, Kubina, Larson, Lincoln,  
Mackie, MacLean, Moyer, Navarre,  
Parnell, G.Phillips, Ulmer

Nays: 13 Baker, Barnes, Brown, Bruckman,  
Gonzales, Hanley, Leman, Martin,  
M.A.Miller, R.Phillips, Sharp,  
Taylor, Zawacki

Excused: 1 M.W.Miller

Absent: 1 Carney

Koponen changed from "Nay" to "Yea".

And so, Revised Amendment No. 1 was divided.

Part 1 of Revised Amendment No. 1:

Page 2, line 17:

Delete "shall"  
Insert "may"

CSHB 7(FIN)

Page 4, line 15 after "district":

Delete "shall"  
Insert "may"

Page 4, line 16 after "and":

Delete "shall"  
Insert "may"

The question being: "Shall Part 1 of Revised Amendment No. 1 be adopted?" The roll was taken with the following result:

CSHB 7(FIN)  
Second Reading  
Revised Amendment No. 1  
Part 1

Yeas: 15 Baker, Barnes, Choquette,  
Gonzales, Hanley, Larson, Leman,  
Mackie, Martin, M.A.Miller,  
Parnell, R.Phillips, Sharp, Taylor,  
Zawacki

Nays: 22 Boyer, Brown, Bruckman,  
Davidson, B.Davis, C.Davis,  
Donley, Ellis, Finkelstein, Foster,  
Gruenberg, Grussendorf, Hudson,  
Ivan, Koponen, Kubina, Lincoln,  
MacLean, Moyer, Navarre,  
G.Phillips, Ulmer

Excused: 1 M.W.Miller

Absent: 2 Carney, Jacko

Ivan changed from "Yea" to "Nay".

And so, Part 1 of Revised Amendment No. 1 was not adopted.

Part 2 of Revised Amendment No. 1:

Page 3, lines 10 - 12:

Delete "A school health and personal safety education specialist position shall be established

and funded in the department to coordinate the program statewide."

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The question being: "Shall Part 2 of Revised Amendment No. 1 be adopted?" The roll was taken with the following result:

CSHB 7(FIN)  
Second Reading  
Revised Amendment No. 1  
Part 2

Yeas: 31 Baker, Barnes, Boyer, Brown,  
Choquette, Davidson, B.Davis,  
C.Davis, Donley, Ellis,  
Finkelstein, Foster, Gonzales,  
Gruenberg, Grussendorf, Hanley,  
Hudson, Koponen, Larson, Leman,  
Mackie, MacLean, Martin,  
M.A.Miller, Moyer, Navarre,  
G.Phillips, R.Phillips, Sharp,  
Taylor, Zawacki

Nays: 7 Bruckman, Carney, Ivan, Kubina,  
Lincoln, Parnell, Ulmer

Excused: 1 M.W.Miller

Absent: 1 Jacko

And so, Part 2 of Revised Amendment No. 1 was adopted.

\_CSHB 7(FIN) am\_

Representative Barnes moved and asked unanimous consent that she be allowed to change her recommendation on the Finance Committee report (page 721) from "do pass" to "do not pass". There being no objection, it was so ordered.

Amendment No. 2 by Leman was not offered.

Amendment No. 3 by Leman:

Page 2, line 20, following "alcohol":

Insert ", tobacco"

Page 2, line 20, following "substance":

Insert "use and"

Representative Leman moved and asked unanimous consent that Amendment No. 3 be adopted. There being no objection, it was so ordered.

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\_CSHB 7(FIN) am\_

Amendment No. 4 was not offered.

Amendment No. 5 by Leman:

Page 3, lines 5 - 7, following "program and"

Delete remainder of the sentence

Insert "a method of securing parental permission before presenting students with the materials used in human growth and development instruction; a district shall use procedures to provide that students allowed to participate and not allowed to participate in the program are not embarrassed by the process."

Representative Leman moved and asked unanimous consent that Amendment No. 5 be adopted.

Representative Boyer objected.

Representative Navarre placed a call of the House.

The call was satisfied.

The question being: "Shall Amendment No. 5 be adopted?" The roll was taken with the following result:

CSHB 7(FIN) am  
Second Reading  
Amendment No. 5

Yeas: 15     Bakey, Barnes, Choquette,  
Gonzales, Hanley, Hudson, Leman,  
Martir, M.A.Miller, Parnell,  
G.Phillips, R.Phillips, Sharp,  
Taylor, Zawacki

Nays: 24     Boyer, Brown, Bruckman, Carney,

Davidson, B.Davis, C.Davis,  
Donley, Ellis, Finkelstein, Foster,  
Gruenberg, Grussendorf, Ivan, Jacko,  
Koponen, Kubina, Larson, Lincoln,  
Mackie, MacLean, Moyer, Navarre,  
Ulmer

Excused: 1 M.W.Miller

Absent: 0

And so, Amendment No. 5 was not adopted.

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\_CSHB 7(FIN) am\_

Amendment No. 6 by Ivan and Leman:

Page 2, line 21, following "(CPR)":

Insert ", outdoor survival skills and water and  
boating safety"

Representative Ivan moved and asked unanimous consent that  
Amendment No. 6 be adopted. There being no objection, it  
was so ordered.

Amendment No. 7 by Leman:

Page 3, line 9, following "education program":

Insert "Human growth and development guidelines  
shall be developed in consultation with the U.S.  
Surgeon General, following the programs that are  
demonstrating to be most successful in maintaining  
health and preventing pregnancy and the  
transmission of diseases."

Representative Leman moved and asked unanimous consent that  
Amendment No. 7 be adopted.

Representative Boyer objected.

The question being: "Shall Amendment No. 7 be adopted?" The  
roll was taken with the following result:

CSHB 7(FIN) am  
Second Reading  
Amendment No. 7

Yeas: 15 Baker, Barnes, Choquette,  
Gonzales, Hanley, Hudson, Leman,

Martin, M.A.Miller, Parnell,  
G.Phillips, R.Phillips, Sharp,  
Taylor, Zawacki

Nays: 24 Boyer, Brown, Bruckman, Carney,  
Davidson, B.Davis, C.Davis,  
Donley, Ellis, Finkelstein, Foster,  
Gruenberg, Grussendorf, Ivan, Jacko,  
Koponen, Kubina, Larson, Lincoln,  
Mackie, MacLean, Moyer, Navarre,  
Ulmer

Excused: 1 M.W.Miller

Absent: 0

And so, Amendment No. 7 was not adopted.

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\_CSHB 7(FIN) am\_

Representative Gruenberg moved and asked unanimous consent that CSHB 7(FIN) am be considered engrossed and advanced to third reading. There being no objection, it was so ordered.

CSHB 7(FIN) am was read the third time.

The question being: "Shall CSHB 7(FIN) am pass the House?"  
The roll was taken with the following result:

CSHB 7(FIN) am  
Third Reading  
Final Passage

Yeas: 27 Boyer, Brown, Bruckman, Carney,  
Davidson, B.Davis, C.Davis,  
Donley, Ellis, Finkelstein, Foster,  
Gruenberg, Grussendorf, Hudson,  
Ivan, Jacko, Koponen, Kubina,  
Lincoln, Mackie, MacLean, Moyer,  
Navarre, Parnell, G.Phillips,  
R.Phillips, Ulmer

Nays: 12 Baker, Barnes, Choquette,  
Gonzales, Hanley, Larson, Leman,  
Martin, M.A.Miller, Sharp, Taylor,  
Zawacki

Excused: 1 M.W.Miller

Absent: 0

And so, CSHB 7(FIN) am passed the House.

Representative Boyer moved and asked unanimous consent that the House adopt the following amended House Health, Education & Social Services Committee Letter of Intent:

Amended House  
Health, Education & Social Services Committee  
Letter of Intent  
for  
CSHB 7(FIN) am

"It is the intent of the Legislature to allow communities to decide whether to establish separate health curriculum advisory committees or to work within the confines of existing advisory school boards for the purpose of advising on matters related to health education. It is not the intent of the Legislature to discourage smaller communities with populations under 50 from developing a health curriculum, but rather those communities may work within the school system already in place.

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\_CSHB 7(FIN) am\_

It is further the intent of the Legislature to encourage the university system to add a course in health education and a course in public safety to the core requirements for a degree in education, at both the elementary and secondary level. Additionally, teachers applying for recertification should be encouraged to take health and personal safety courses. Teacher aides and student teachers, as part of their teaching practicum should have to develop and participate in health and personal safety lesson plans while in the classroom.

It is further the intent of the Legislature that all appropriate departments and divisions within the State work with school districts to develop and deliver an appropriate health and personal safety curriculum for each community. The Department of Education and the Department of Health & Social Services should be consulted regularly to determine the best approach and the most current methods for teaching health and personal safety.

It is further the intent of the Legislature that the transitional period included in HB 7 provide for time to develop this curriculum.

Finally, it is the intent of the Legislature to conduct a review of the costs associated with providing comprehensive health and personal safety education and to make recommendations to the appropriate committees regarding the impact of the curriculum on the educational instructional unit."

There being no objection, it was so ordered.

Representative Zawacki gave notice of reconsideration of his  
vote on CSHB 7 (FIN) am.