While choices about personal relationships and sexual behavior are some of the most challenging and life-altering a young person can make, current sexual health programs across the Commonwealth do not properly equip students with the necessary information to make healthy decisions. For schools that opt to offer a sexual health education program, “An Act relative to healthy youth,” or the “Healthy Youth Bill” (S.234, H.2053) will help students across the Commonwealth be educated about and protected from STIs, unintended pregnancy, and dating violence. The bill establishes a comprehensive and inclusive framework of topics schools will be required to cover based on medically-accurate and age-appropriate information.

■ The Bill
S.234, H.2053: An Act relative to healthy youth

■ Elevator Speech
My name is [______], and I am a student at Brandeis University. Only through responsible planning can we ensure that youth across the Commonwealth make healthy choices which will benefit the common good for present day and future communities.

It is concerning that sexual health education programs being taught across the Commonwealth, especially abstinence-only curricula, do not effectively prepare students to make appropriate decisions which could impact their long-term developmental health. Currently, 20% of Massachusetts students were never taught about STIs, although over half of all chlamydia cases in Massachusetts are reported in adolescents. Additionally, 7% of high school students disclose that they have experienced some form of dating violence, while many more may choose not to disclose their experiences due to lack of resources and support.

"An Act relative to healthy youth" ensures that schools which elect to provide sexual health education programs do so based on comprehensive, medically accurate, and age-appropriate information, which has been shown to better equip students to make healthy decisions throughout their lives. Passage of this bill would significantly bolster local communities’ health and safety outcomes. Will the legislator
Developmental health is an important aspect of young people's lives. An experienced educator can teach young people about their bodies, but the existing system isn't working. All those places kids are looking for information are not proper substitutes for what children are learning about their bodies across the Commonwealth, and it means none of what they're learning is required to be true. Those places kids are looking for information are not proper substitutes for what an experienced educator can teach young people about their developmental health.

And there is a lot young people should know about their developmental health. Sex education is not simply about how babies are made. It's about bodily autonomy, HIV and STIs, contraception, options after becoming pregnant such as adoption or abortion, gender identity, sexuality, and forming healthy relationships free of abuse. All of these things come with adulthood no matter where a person lives. And where problems start in youth, they usually tag along into adulthood.

Excerpt from the Storybook

Eliana’s Story

Eliana, a student at Needham High School, volunteers as a peer counselor for Planned Parenthood. She reports that some of her own friends who have experienced sexual assault were not aware of what qualified as relationship abuse. Because Eliana believes that this knowledge is empowering, she has joined a group of teens who give workshops at schools around the Boston area about comprehensive sex health and healthy relationships. For some students, these workshops will be their first and/or only experience with sexual education.

Cory’s Story

Cory, a graduate of Brookline High School, confided that “overall, I think that my school preferred the method of scaring kids away from all sexual activity. My instructors would tell us all of the graphic effects of STIs. The education was viewed almost exclusively through a heterosexual lens, so there was no real mention of how to practice safe sexual activity in regards to the LGBTQ+ community. The program was archaic and outdated.”

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Op-Ed

Linda

Older siblings. Friends. Television. BuzzFeed, WebMD, and Facebook. These are all the places youth today are finding information about sex. Or should I say “misinformation.” Because in the era of “alternative facts” and social media, the truth about sex can be hard to pin down. This is especially true because schools in Massachusetts are not required to teach sexual education. Worse, where sex ed. is being taught, there’s no law that mandates what should be taught or how. This means that there are huge inconsistencies between what children are learning about their bodies across the Commonwealth, and it means none of what they’re learning is required to be true.

When 25 communities across the state report teen pregnancy and birth rates between 10-50 per every 1,000 women ages 15-19, and the statewide adolescent STI rates are increasing to epidemic levels according to the CDC, it’s clear that the existing system isn’t working. All those places kids are looking for information are not proper substitutes for what an experienced educator can teach young people about their developmental health.

And there is a lot young people should know about their developmental health. Sex education is not simply about how babies are made. It’s about bodily autonomy, HIV and STIs, contraception, options after becoming pregnant such as adoption or abortion, gender identity, sexuality, and forming healthy relationships free of abuse. All of these things come with adulthood no matter where a person lives. And where problems start in youth, they usually tag along into adulthood.

S.234/H.2053: “An Act relative to healthy youth” seeks to establish sexual education that is verified by scientific evidence and supported by medical professionals. It requires topics which are taught to be age-appropriate as determined by local school teachers, administrators, parents, students, and community activists. It provides curricula which are inclusive of all identities and backgrounds to reflect the growing diversity across the state. It makes resources accessible to guide students into adulthood without the burden of responsibilities they aren't mature enough to handle yet. The Healthy Youth Bill will guarantee that every student of Massachusetts can make informed decisions about their developmental health while maintaining school and parent choice.

At the recent hearing on the bill before the Joint Committee on Education, a Brookline High School graduate testified that by passing this bill, legislators would be reinforcing to youth across the Commonwealth the importance of sexual health matters “instead of leaving us with stigma and shame and confusion and midnight Google searches trying to fill in the gaps of what our schools have failed to teach us.”

Many states across the US are leading the way. 24 states require sex ed., and 13 states have passed bills similar to S.234/H.2053 which mandate that sexual education be medically accurate. Unfortunately, Massachusetts is not one of them. Despite its traditionally progressive attitude toward education and youth, the Commonwealth has done little to quell the spread of alternative facts about students’ sexual health.

Opponents to this bill would like to believe the myth that parents are teaching their kids everything they need to know. But let’s be honest: not every parent wants to explain the mechanics of sex or the gory details of STIs to their child, and not many children are asking their parents. These interactions range from painfully awkward to dangerously inaccurate. And since sex ed. encompasses a lot more than a simple “birds and bees” conversation, not all parents are equipped to handle this daunting topic. But for those lucky few children whose parents are willing to tackle this responsibility, the bill guarantees them the freedom to preview any sex ed. materials and opt their children out of their school’s program. This way, regardless of varying home situations, every student has access to the knowledge they need to develop into healthy.
adults. Where they receive this knowledge is up to parents to decide.

One thing we can all agree on is that sex education should not be happening on the playground, spread through whispered rumors, and verified by a random and uncertified entity on the internet. The Healthy Youth Bill is the solution Massachusetts needs to stop the misinformation. If you agree that students should be taught by teachers with parents’ consent rather than BuzzFeed and cafeteria gossip, support S.234/H.2053. Call or write a letter to your state legislator today. Don’t let another child reach the cusp of adulthood without the real facts to make decisions which could shape his or her future.

■ House Ways and Means Script

My name is [___], and I am a student at Brandeis University. Only through responsible planning can we ensure that youth across the Commonwealth are protected from STIs, unintended pregnancy, and dating violence. Senator Spilka, due to your expertise and experience in social work, the health of today’s youth and the Commonwealth’s future citizens should be a top priority.

Abstinence only programs and other sexual health education programs do not effectively prepare students to make appropriate decisions which could impact their long-term developmental health. Currently, 20% of Massachusetts high school students were never taught about STIs and 48% of students were never taught about condom use. Additionally, 64% of chlamydia cases and 43% of gonorrhea cases are reported in the age range of 15-24.

“An Act relative to healthy youth” (S.234) ensures that schools which elect to provide sexual health education programs do so based on comprehensive, medically accurate, and age-appropriate information which has been shown to better equip students to make healthy decisions throughout their lives.

This program is revenue neutral. Any school intending to participate is merely replacing an already existing health program. This program would be covered under individual school budget allocations indicated in the fiscal year 2018 budget. There do exist requirements for properly trained teaching personnel, but pre-existing teachers can fill these positions, or be trained in the proper manner. Schools which require training can apply for grants from programs such as Line-Item 4530-9000, which provides teen pregnancy prevention services for students in high-risk communities. Through this line-item program, schools must satisfy the creation of a teen pregnancy/STI/HIV prevention planning team which is responsible for choosing a medically-accurate, evidence-based, comprehensive, and culturally-sensitive curriculum best suited for their school (“Teen Pregnancy Prevention Program”). The Commonwealth no longer receives federal funding for abstinence-only education. Schools with abstinence-only programs will not lose further funding or be required to participate under threat of any penalty.

Additionally, CDC STI and HIV prevention and research received approximately $788 million for the fiscal year 2017. This funding is further divided into HIV prevention by department, HIV surveillance, activities to improve program effectiveness, local and community organizations, and adolescent and school health (Center for Disease Control and Prevention). However, due to the change in presidential administration, funding for these programs may shift. Additional funding includes the Personal Responsibility Education Program (PREP), which totaled $75 million per year for the FYs 2010–2014. The U.S. Department of Health and Human Services, Administration for Children and Families (ACF) implements the grant. PREP includes a $55 million state-grant program; $10 million to fund local entities through the Personal Responsibility Education Innovative Strategies (PREIS) Program; $3.5 million for Tribal PREP, for tribes and tribal organizations; and $6.5 million for evaluation, training, and technical assistance. (SIECUS State Profile). With the help of this bill, the state could potentially reduce spending on unintended pregnancies in the long run.

Further, the Act allows parents and educators to determine what the definition of “age-appropriate” means for their community. The Act provides every parent the chance to review the materials their child’s school will be using and to opt-out without threat of punishment. Parents additionally have the first 10 days of each school year to review the proposed curriculum. The Act completely respects the agency of local communities while providing guidelines that establish a minimum of public health and safety standards.

We ask that you vote favorably for “An Act relative to healthy youth,” to enable access to accurate education for not only the youth, but for all communities around the Commonwealth. Thank you very much.

■ Letter to the Legislator

My name is [_____] and I am a student at Brandeis University. I, along with my peers [_____] and [______], am working with Planned Parenthood League of Massachusetts to advance S.234: “An Act relative to healthy youth.” As a parent and a staunch advocate for the welfare of children, you understand that the health of Massachusetts’ youth is of great importance. As you know, our children deserve every opportunity to lead a healthy and safe life. Regrettably, our current sexual health programs across the Commonwealth do not properly equip students with the necessary information to make healthy
decisions. Only through responsible planning can we ensure that our youth across the Commonwealth are protected from sexually transmitted infections (STIs), unintended pregnancies, and dating violence.

Unfortunately, a disproportionate number of teens across the Commonwealth participate in unhealthy and unsafe sexual behaviors. Approximately 38% of sexually active teens in Massachusetts reported having unprotected sex. As a result, this has led to the contraction of STIs, and teen pregnancies. Moreover, 64% of chlamydia cases and 43% of gonorrhea cases are in the prime age range of 15-24. Due to the lack of knowledge and information about safe sex, teens are engaging in risky sexual behavior.

Furthermore, approximately 4% of middle school students and 7% of high school students in Massachusetts reported experiencing some form of dating violence. Namely, students have experienced a variation of controlling, abusive, and aggressive behavior in an intimate relationship. Although such numbers may seem relatively low, many victims of dating violence do not report their incidents due to feelings of fear, embarrassment, and lack of knowledge as to what qualifies as dating violence.

Simply, a solution to this pressing issue is a comprehensive sexual education that includes the development of healthy relationships. Numerous states (e.g. California, Colorado, Maine, and Washington) have passed similar legislation and have seen a significant reduction in STIs, unwanted pregnancies, and unhealthy relationships among teens. As we are sure you know, teens who contract an STI unintentionally become pregnant, or are abused in a relationship must deal with the repercussions of these incidents for the rest of their lives.

"An Act relative to healthy youth" (S.234) ensures that schools which elect to provide sexual health education programs do so based on comprehensive, medically accurate, and age-appropriate information. This has been shown to better equip students to make healthy decisions throughout their lives. Abstinence-only sex education has not been proven to effectively reduce STIs and teen pregnancies. The bill is not a mandate, rather it sets a standard for a more effective curriculum while simultaneously respecting local decision-making authority. In addition, the bill complies with the current law that allows parents to opt out of sexual education programs. Most importantly, the bill is revenue neutral and does not require the government to spend any additional funds. In fact, because of the preventative nature of this bill, the Commonwealth may even reduce its financial expenditures on social services.

Again, as a parent and a staunch advocate for the welfare of children, the health of our youth must be one of your top priorities. It is one of the paramount duties of the legislature to comprehensively prepare our youth for adulthood. Please ensure that our youth obtain every opportunity to lead a healthy and safe life by supporting S.234, “An Act relative to healthy youth.” Urge your fellow legislators in the Joint Committee on Education to hold a hearing as soon as possible and vote the bill favorably out of committee.

Excerpts from Campaign Journals

Gilberto

On our first trip to the state house, we met with Senator Sonia Chang-Díaz’s Chief of Staff, Nathaniel Shea, to discuss the Senator’s position on the bill. Right off the bat, Mr. Shea assured us that the Senator has strongly supported the bill in the past on both the senate floor and in the Joint Committee on Education. And that she will continue to do so in this session. During this very moment, it felt like a weight off my shoulders was lifted. It was good to hear that the Senator, who is also the Chairwoman of the Committee on Education, was going to fight for our bill.

Later, our discussion turned to who should we approach that has not been convinced by this bill in the past. Mr. Shea strongly advised us to redirect our efforts to members in the House because they were responsible for the death of the bill in the last session. In addition, Mr. Shea explained that the Senate has voted this bill favorably once before and he predicts that it will be the same outcome during this legislative session. This advice was very much helpful in reorganizing our strategy when meeting with other legislative aides or legislators.

Madeline

We emailed extensively with Samuel Anderson, one of Senator Barrett’s aides. Upon meeting Samuel, we discussed the reasons we decided to become involved with S.234. When Samuel discovered both myself and Gilberto are very passionate about advocating for the prevention of dating violence, Samuel became very excited. Senator Barrett’s office has been very involved in passing legislative material related to dating and domestic violence in the past. Additionally, he has spoken extensively with Malcolm Astley, the father of Lauren Astley, a young girl who was killed by her boyfriend in high school. We had previously done quite a bit of research on Lauren, and her story. To find another connection between our bill and the real world was very encouraging. Samuel encouraged us to reach out to Malcolm (which we did) due to Malcolm’s exhibited support for the bill in previous sessions.

His enthusiastic encouragement to support this bill was very encouraging. It was nice to experience how passionate legislators can become about the legislation. Samuel’s excitement and knowledge also proved that we were on the right track for learning and speaking about the bill. We knew
quite a bit about what she spoke to us about and we were able to engage in an informed discussion, not just a one-sided speech.

**Linda**

Gilbert, Maddy, and I met with Leda Anderson and Nikki Goldschein, who work in Planned Parenthood’s Government Relations department, at their office. They were the most helpful and informative of all the coalition organizers we spoke with. When we met with them, it felt like they were at the epicenter of the fight for the bill. Leda and Nikki were extremely interested in the work we had been doing and were impressed by our legislative report and storybook. The storybook interested them because it displayed our ability to connect with people who could potentially give testimony at hearings. The meeting was also beneficial to us because they sent us more up-to-date data on teen birth rates and STI rates.

I’m glad that we persisted in meeting with them as Jill Ashton advised because they told us that in their lobbying efforts, Planned Parenthood is focusing more on the STI rate side of the argument rather than the teen pregnancy rate side. This is because the teen pregnancy rates in Massachusetts have been going down in recent years, while the STI rate has reached epidemic levels. It was helpful to know this so that we could alter our message and how we sell the bill to legislators.

### Update

The bill became part of a new draft, S.2071, which was reported favorably by the Joint Committee on Education. The Senate Committee on Ways and Means recommended the bill ought to pass with an amendment. A new draft, S.2113, was presented to the Senate and amended. As of September, reprinted with amendments as S.2128, the bill was passed in the Senate and referred to the Committee on House Ways and Means.

For more information

- View the Bill: malegislature.gov/Bills/190/S234
- malegislature.gov/Bills/190/S2071
- malegislature.gov/Bills/190/S2128

Planned Parenthood: plannedparenthood.org