

# Healthy Teens & Hartford Action Plan

HB 5489 – An Act Concerning  
Secondary School Reform

I am Regina Roundtree, Interim Executive Director of the Hartford Action Plan. Some of you may recognize me from Apados Education and my work with at-risk youth via tutoring and educational advocacy. Although I am still the CEO of Apados, I believe that my work with the Hartford Action Plan Breaking the Cycle Campaign is another avenue to positively effect the educational environment for youth in this city. So I thank you for the opportunity to speak with you in support of House Bill 5489, an Act Concerning Secondary School Reform. The Hartford Action Plan is proud to be part of the Healthy Teens Coalition. We applaud your support of this bill and are grateful that you have included a full credit of health education.

The Hartford Action Plan Breaking the Cycle campaign has been leading teen pregnancy prevention activities in Hartford since 1995. During that time the birth rate to teens ages 15 to 17 was cut in half from 94 births per 1000 in 1995 to 50 births per 1000 in 2006 (the latest year for which we have data). However National data is stating that there has now been an increase in teen pregnancies.

We know that comprehensive sexual education must start early and continue, always in an age appropriate way, through high school. It must teach not only the body parts, but also avoidance of risky behaviors, how to protect themselves, how to recognize good and bad relationships. In Hartford where the school system has a health education curriculum that covers a large range of issues, middle school teens are receiving only 8 sessions per year of health education, with sex education as only one or two parts of those 8 sessions. CT's state guidelines suggest that the recommended annual dosage for comprehensive health education is 80 hours per year for grades 5 through 12. Providing comprehensive sex education within the health education curriculum means that we reach far more young people than we can from smaller out of school community programs; through a full credit of health education we can continue to lower the teen birth rates, decrease many risky behaviors in teens and increase the outcomes for their children.

Let's talk about the outcomes for children born to teen mothers (the teen mothers that gave birth in 1995-2000 are in our middle schools and high schools right now.

## Taken from Fast Facts Healthy Teen Network

- Children of teen parents are 50% more likely to repeat a grade and are less likely to graduate from high school than children of older parents .
- Children born to unmarried, high school drop-out teen mothers are 10 times more likely to live in poverty than those born to married women over the age of 20 .
- Teenage sons of teen mothers are 2.7 times more likely to be incarcerated than sons of older mothers .
- Though children of teen parents have more health problems than children born to older parents, they receive only half the level of care and treatment .

These facts I have shared support Hartford Action Plans point that reproductive health is important issue to teach in schools if we want to see better outcomes for our youth. We support Healthy Teens CT with the desire to see comprehensive health education as a one full credit requirement.

In closing I will make a Math analogy.

No one would deny that addition, subtraction, division and multiplication are important concepts to learn. Things like  $8+9=17$  or  $3*25$  equals 75. Those seem obvious and I say that this is the same for .5 credit of health education.....it is a necessary foundation. BUT Here is a more difficult math problem:

I need to put down new tiles on my kitchen floor. I have measured the area and come up with 10 feet by 7. I go to home depot and see a box of tiles I like. Each tile is 1 square foot, the box contains 20 tiles and costs \$17. I have a coupon for "buy 2 get one free". How many boxes do I have to buy to cover my floor?

For more information contact: Regina V Roundtree, Interim Executive Director, Hartford Action Plan, 350 Farmington Ave Hartford, CT 06105, 860-805-4799, regina@teenpregnancyhartford.org

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The information and logical process I need to complete that real life problem require more than just basic Math skills. I need Algebra to figure out the problem. I will compare this to an additional half credit of Health education. It is not enough to give youth the facts and then never allow time for them to be taught how to use the information. We believe that 1 full credit is just the beginning to teaching our youth the value of taking care of their health... physical, mental emotional and reproductive.

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APCO Insight, a public opinion research firm located in Washington, D.C., conducted a survey of Connecticut residents for the national organization Advocates for Youth on attitudes toward sexuality education. The survey was conducted among 699 randomly selected adults in the state of Connecticut, including over-samples in Hartford, Bridgeport, Waterbury, and New Haven of 100 residents each. Interviews were conducted over the telephone between December 9 and December 16, 2003. The margin of error overall is  $\pm 3.8\%$ .

## *Summary of Findings*

- Connecticut residents agree by a large margin that young people should receive sex education that teaches about birth control and sexually transmitted diseases, yet most also believe that the schools should also promote abstinence in their sexual education curriculum. In fact, most Connecticut residents (75%) do not believe that these two activities are contradictory and that schools should both promote abstinence and provide information about birth control and safe sex practices.
- A majority of Connecticut residents (59%) oppose current national policy that prohibits programs receiving federal abstinence funding from providing information about condoms and birth control as methods for preventing pregnancy and disease and which solely teaches the message of abstinence before marriage. Moreover, a majority (61%) say they would take action if they found out that their children's school prohibited information about birth control.
- Large majorities support sex education courses for junior high and high school students (79% and 91%, respectively), yet most do not support sex education for younger elementary school students aged 6 to 8 (81%). Connecticut residents are more divided on whether sex education should be taught to older elementary school students aged 9 to 11 (44% support and 53% oppose).
- Generally, Connecticut residents do not believe that young people receive information about sex too early. In fact, a large majority believe that young people get information about sex, birth control, and protection from sexually transmitted diseases either too late (29%) or at about the right time (36%).
- A majority of Connecticut residents support an active role for nurses and guidance counselors in directing sexually active young people to clinics that treat and prevent sexually transmitted diseases and to family planning clinics (79% and 69%, respectively). Additionally, a majority (60%) support school personnel making condoms and other forms of birth control accessible to sexually active young people.