



SENATE EDUCATION COMMITTEE

Chairman Lehner
Vice Chair Brenner
Ranking Member Fedor

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Co-Chairs, The Collaborative for Comprehensive School Aged Health

Chairman Lehner, Vice Chair Brenner, Ranking Member Fedor, and members of the Senate Education Committee: thank you for considering our testimony. Our names are Steph Wahome-Lassiter and Kate Ingersoll, and we serve as co-chairs of the Collaborative for Comprehensive School Aged Health. The Collaborative for Comprehensive School Aged Health, known simply as the 'Collaborative' in Cleveland, is a network of youth serving organizations in Northeast Ohio, working to forward access to science-based sex education in our local schools to ensure our young people have the information they need to stay healthy. We offer this testimony as interested parties to Senate Bill 121, establishing health standards for the state of Ohio.

The Collaborative has advocated for over a decade for access to accurate health information and high quality health services for young people. Our table includes social workers, pediatricians, public health professionals and educators and for many years has hosted a Youth Leadership Council comprised of young people. Most of us are also parents, we attend church and temple – we support local public and private schools where our children are students; the Collaborative represents a holistic understanding of young people and adolescent health.

The Collaborative applauds the state's efforts to effect health standards. Health standards are an important first preventive health step for our students, who struggle with vaping and other substance use, nutrition, depression and other health issues at a time when they should be at peak health. One of our roles is to provide capacity building support – or training – for schools and staff. Through this work we hear from schools that the lack of health



standards leaves them without needed guidance to support our youngest citizens to be healthy. Schools are aware of the opportunity they have to positively impact students but haven't had the framework needed to accomplish this.

We also regret that this bill language reinforces the division between sexual and reproductive health and other preventive health. Given that standards are not content or curriculum specific, this was unnecessary and continues to send the message that the Ohio legislature does not prioritize the incredibly high rates of sexually transmitted infections, sexual assault or unplanned pregnancies among our young people. Robust studies have shown that sex education does not lead to earlier or increased sexual activity. The only exception is programs that teach complete abstinence as the only option for healthy sexuality which is what Ohio law encourages.

Parents, teachers, clinicians and legislators have a profound role – we shape the environment of our young people, who cannot vote and who trust us completely for age appropriate and accurate information about their bodies and health. We are hopeful that the committee considers a more holistic view of adolescent health in the future.

We would be happy to answer any questions from committee members and appreciate this opportunity to provide testimony.