

June 8, 2020

Written (Opponent) Testimony in regards to SB 121 presented to the Senate Education Committee of the Ohio Senate -133rd General Assembly - Ravi Kulasekere PhD, ND, BCHHP

Chair Lehner, Vice Chair Brenner, Ranking Member Fedor, and members of the Senate Education Committee, I thank you for the opportunity to provide written testimony **opposing** SB 121.

My name is Dr Ravi Kulasekere, a practicing board certified doctor of traditional naturopathy (ND) and a medical physicist (PhD) by training with over a dozen years working in the field of cancer care. I am writing to express my opposition to SB 121 for a number of reasons and a few are outlined below.

Ohio currently has an age-appropriate health education curriculum for students from grades K-12 (<http://education.ohio.gov/Topics/Learning-in-Ohio>) which has been updated as necessary and in a timely manner to incorporate growing needs. What this bill is proposing to do is to remove the checks and balances we have in Ohio through the legislative process by eliminating the approval of both houses and at least one public hearing now needed to change health education curriculum (except venereal disease) and place the responsibility of developing health education standards in the hands of the state board of education where there will be no legislative or parental input to what is being taught to our kids in school. This is totally unacceptable considering the influence of special interest groups and others seen in recent times, whose ideas of what health education is, might not encompass the views of the majority. This bill, basically by removing the existing checks and balances, simply allows a back door to special interest and specifically pharmaceutical interests to come into our schools and pose off as health promoting entities while demonizing any and all other effective and proven health measures as misinformation.

The bill's proponents also have claimed that the state board of education is the only entity able to provide accurate and valuable health education standards which may not align with 'un-informed' adults at home and that the students should trust adults who the state board deems informed. This is a ridiculous assumption, given the fact that every parent strives hard to get the best possible information from the most trusted resources for their children. The proponents of this bill also incorrectly assume that parents don't have the right information since they have not gone through the present health education standards in school, another egregious and false assumption that is far from the truth. This is the information age where processes by which one can achieve better health is available at the fingertips of anyone who is taking the time to look and the modalities and opportunities to improve health are diverse and varied. I have many clients in my practice who are well-versed in aspects of achieving and maintaining better health through methods that are certainly not those adopted by the pharmaceutically driven healthcare models that will be taught in schools. If adopted this bill will allow schools to teach children that the beliefs and practices of their parents are wrong and that the pharmaceutical model of health (or more appropriately sick-) care model is what is right. This will be a clear infringement and over-reach on the part of the state and will cause confusion and discord within the family unit.

Finally, we need to look at what is going on with the deplorable state of the health of our children in this nation and look at other states where these standards have been adopted and see if the additional tax payer burden is warranted and if the standards are doing anything to advance better health. It has been implied that Ohio ranks low in health due to lack of standards. This is an outright fallacy. According to 2018 data Ohio ranks 23 in a nation of 50 states, a far cry from being at the bottom of the list. (<https://datacenter.kidscount.org/data/tables/9985-health-rank?loc=1&loct=2#detailed/2/2-9,11-52/false/37/any/19345>)

What this means is that these standards are not contributing much to better health outcomes in states where they have been implemented. This should come as no surprise when you look at what schools feed kids and

promote as healthy, based on industry input and not on any real health measures. What Ohio needs are not more bureaucrats telling kids what to do that is not going to help, and in some cases even cause more harm. What we need is to find ways to work with parents and teachers to teach known healthy habits and better food and disease prevention choices that work with the values that align with families and have proven benefits as used around the world successfully. With this in mind I urge you to consider NOT supporting SB121 which is too vague and will not achieve anything we cannot achieve with the health education curriculum today. This bill would also create unwanted tension and division in homes where the healthcare adopted may not be the primary source of better health. Thank you for your time and consideration.

Yours Faithfully,

A handwritten signature in black ink, appearing to read "R. Kulasekere", with a horizontal line underneath the name.

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