OHIO HOUSE PRIMARY AND SECONDARY EDUCATION COMMITTEE

Re: HB 165- Regards the adoption of health education standards

Testimony submitted by Jen Morel, MPH, CHES Ohio Society for Public Health Education

Representative Blessing and other distinguished committee members, I want to thank you for this opportunity to address HB 165. My name is Jen Morel; I have been a Certified Health Education Specialist for the past 14 years. I am here today representing the Ohio Society for Public Health Education, for which I am a long standing Board member, and past president.

The Ohio Society for Public Health Education is in full support of requiring the State Board of Education to adopt health education standards and for requiring that only statewide venereal disease education standards and curriculum be approved by the General Assembly. Ohio is the only state in the nation without health education standards, and health education is the only content area in Ohio that does not have academic content standards. Health education standards would establish, promote and support health-enhancing behaviors for students in all grade levels—from pre-Kindergarten through grade 12.

Health starts where we live, learn, work and play. Ohio ranks 24th in health care spending but has worse health outcomes than 47 other states. Numerous studies show that healthy students have better academic and health outcomes, ultimately preparing them to succeed as adults. Students are able to make healthy choices when they are given the foundational tools to improve and maintain their health, prevent disease, and reduce risky behaviors. In addition to benefitting student outcomes, standards also provide school districts, administrators and teachers guidance in designing or selecting curricula that ensures that students are developing skills to adopt or maintain health behaviors.

The unfortunate reality is that the legislative requirements in the Ohio Revised Code provide minimal guidance for which topics should be addressed within a health education curriculum. It is plausible that the health education is being checked off the list when students how to count calories in math class, or read a story about a person's struggle with addiction during their language arts lesson. This is not a poor reflection of our public school districts- our educators are doing outstanding work to prepare the next generation of Ohio's workforce for success. It is, unreasonable to expect teachers to teach students to make healthy choices without guidance on concrete learning objectives. Health education standards provide students with a comprehensive and developmentally appropriate skill based health education curriculum. They do not prescribe content or how to teach content. Rather, they are learning outcomes that can be achieved across any health education topic, and some of the skills learned can be applied to other aspects of what it means to be a productive member of society.

If we are using addiction as an example, we know that while addiction can happen to anyone, a person's formative years are years of opportunities, but also danger. Children and teens are heavily influenced by the actions of their family, peers, and by the culture of their community. HB 165 would allow educators to develop units, lessons and assignments that ensure students are able to understand the key concepts as it relates to the type of addiction their community

struggles with the most, analyze the influence that their peers and the culture of their community might have on their choice to experiment or not, what the valid and reliable resources are about addiction, where to access them and how to prevent relapse. Health education standards would ensure that students practice communication and refusal skills so when they are faced with an opportunity to try an addictive substance, they are comfortable saying no, and can effectively set a goal to stay sober. They will also learn how help change societal norms as it relates to addiction and lead by example for future generations.

Public health experts believe that change should happen "with the community, not for the community." We believe that the community knows what it needs, and it's not our place to tell people what they need to do to live longer, or increase their quality of life. It's our job to listen to their perspective, and understand what their needs are so we can best support them with education and resources that allow individual goal achievement. The same mindset can be applied to schools and health education. The flexibility of the content that can be taught by passing the proposed legislation can be applied to any health topic, but I'll leave you with tobacco use and prevention as my final example. Within Ohio's rural communities, tobacco use often takes the form of snuff or chew. In more urban communities JUUL, hookah and vaping are more frequently used. Districts would be able to choose the content of what they are teaching to meet the community's needs- as long as it meets the proposed standards.

I am urging you to vote yes on HB 165. School should not be hazardous to your health. Our actions today pave the path for tomorrow. It's important we do everything we can to give students to choose the path that leads to success as an adult. It's time to expand the way we think about health, not just how to get it back.

Thank you for your attention to this issue and for your commitment to the health of all Ohioians.