

Testimony of Adam Tenner  
Executive Director



Healthy Schools Act of 2009

Hearing of the Committee on Government Relations and  
the Environment

March 26, 2010

Thank you, Councilmember Cheh for the opportunity to testify in strong support of the Healthy Schools Act. My name is Adam Tenner, and I am the Executive Director of Metro Teen AIDS and a member of the DC Healthy Youth Coalition. At Metro TeenAIDS, we are focused on protecting District youth aged 13 to 24 from HIV and other sexually transmitted diseases, and providing care advocacy for young people already battling HIV.

We need the 100 Percent Solution.

Over the past month, we have learned that nearly 50% of deaths in DC were the result of preventable causes. We learned that more than 50% of all reported Chlamydia and gonorrhea rates were among youth. We learned that nearly 15% of District residents recently diagnosed with AIDS were probably infected in their teens. And even though some younger gay men of color are using condoms more, they are still getting infected at higher rates.

And that was only what we learned in the last 30 days!

The Healthy Schools Act should be passed because all students – whether they attend traditional public schools or charter schools – have a right to the information that can save their lives. From DC Appleseed's Report Cards on HIV/AIDS, we know that far too many students in DC public schools receiving inadequate HIV education whatsoever and others are receiving none. Literally: none.<sup>1</sup> We shouldn't accept this.

The DC State Board of Education passed health learning standards, which include HIV education, in 2007. All DC students, whether they attend traditional public schools or public charter schools, have a right to this information.

As this Council knows well, HIV/AIDS is 100% preventable. Yet the District's more than 3% of district residents are HIV positive, and that number may be even higher. This was a preventable tragedy. This was a preventable outrage.

A 2006 study found that a lifetime of HIV medications cost well over \$600,000.<sup>2</sup> To cover the costs of smoking, DC spends \$78 million in taxes every year.<sup>3</sup> So, by all means, let others say that we can't afford this: it is the status quo that is unaffordable.

Health can change our youths' behaviors and give them the skills they need to live long and healthy lives. The Committee on Health's Youth Sexual Health Report is such a valuable resource because it provides a roadmap derived from the understanding that high quality health education works.

The Joint Committee on National Health Standards reports that health education programs in schools can contribute directly to a student's ability to successfully adopt and practice behaviors that protect and promote health and avoid or reduce health risk.<sup>4</sup> From our own experience, we know that high quality HIV and reproductive health education has been shown to be delay the onset of sexual behavior and arm youth

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<sup>1</sup> <http://www.dcappleseed.org/library/5th%20Report%20Card%20Final.pdf>

<sup>2</sup> <http://www.cbsnews.com/stories/2006/11/02/health/webmd/main2146532.shtml>

<sup>3</sup> <http://www.tobaccofreekids.org/reports/settlements/toll.php?StateID=DC>

<sup>4</sup> <http://www.nationalguidelines.org>

with the information and skills they need to protect themselves. Isn't this something we want for all DC students?

Unhealthy students cannot achieve academically. It is just common sense that a young person home sick battling the flu because a classmate didn't know to cover his mouth when sneezing will have a harder time battling algebra homework. It is just common sense – more so for those of us who are parents – that a teenaged mother of young children will lack the energy to focus in the classroom. And new evidence shows that physically active youth are much better at resolving conflict and are less likely to participate in high risk behaviors. In fact, the Centers for Disease Control and Prevention has documented that school health programs can have positive impacts on educational outcomes, as well as health-risk behaviors and health outcomes.<sup>5</sup>

Measuring our progress on health education is also vitally important. We are pleased that this bill clarifies the responsibility of the Superintendent to measure students' progress on the Health Learning standards. We would ask that the Council consider what might strengthen the bill's language to ensure that we evaluate health education with the same rigor that the city looks at reading and math. We think the language should ensure that the council can hold OSSE accountable for the mechanisms and frequency of any evaluation measures. At the end of the day we need to ensure that the Health Learning Standards are met by 100% of DC's youth. on the same level as math

*It is unacceptable to deny a child the information that can save her life. The United Nations' Convention on the Rights of the Child is very clear about this. Article 24 of the Convention reads, in part, that states shall "ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents."<sup>6</sup>*

The District has a public health crisis on its hands. It is time that we stop simply talking about epidemics, and take actions that back up those words. Pass this bill. Make it the law. Join us in fighting for the kids who need us.

Thank you.

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<sup>5</sup> [http://www.cdc.gov/HealthyYouth/health\\_and\\_academics/index.htm](http://www.cdc.gov/HealthyYouth/health_and_academics/index.htm)

<sup>6</sup> <http://www2.ohchr.org/english/law/crc.htm>.

