

## TESTIMONY IN SUPPORT OF H.544 /S.268 AN ACT RELATIVE TO HEALTHY YOUTH BEFORE THE JOINT COMMITTEE ON EDUCATION OCTOBER 10, 2023

The Massachusetts Medical Society (MMS) wishes to be recorded in strong support of H.544/S.248, *An Act relative to healthy youth*.

The MMS is a professional association of over 25,000 physicians and medical students and advocates on behalf of patients for a better health care system, and on behalf of physicians, to help them to provide the best care possible. Sexual health education is key to improving overall health outcomes. The Medical Society believes that sexual health education should be comprehensive, medically accurate, culturally, and religiously aware, and age appropriate. Research shows that evidence-based education about human sexuality and sexual reproduction over time provided by pediatricians, schools, other professionals, and parents is critically important to help children and adolescents make informed, positive, and safe choices about healthy relationships, responsible sexual activity, and their reproductive health. Comprehensive sexual health education has been shown to help to prevent and reduce the risks of adolescent pregnancy, Human Immunodeficiency Virus (HIV), and sexually transmitted infections (STIs) for children and adolescents.

The Centers for Disease Control and Prevention estimate that nearly 26 million new STIs occurred in the United States in 2018, with half of those diagnoses among young people aged 15–24.¹ These infections account for almost \$16 billion in health care costs and each of these infections is a potential threat to an individual's immediate and long-term health and well-being.² In addition to increasing a person's risk for acquiring and transmitting HIV, STIs can lead to chronic pain and severe reproductive health complications. In Massachusetts, where schools are not required to teach comprehensive sexual health education, we are seeing an alarming public health trend with increased rates of sexually transmitted

<sup>&</sup>lt;sup>1</sup> Centers for Disease Control and Prevention. Sexually Transmitted Diseases. Life Stages and Populations: Adolescents and Young Adults. <a href="https://www.cdc.gov/std/life-stages-populations/adolescents-youngadults.htm">https://www.cdc.gov/std/life-stages-populations/adolescents-youngadults.htm</a>

<sup>&</sup>lt;sup>2</sup> Centers for Disease Control and Prevention. Report: Sexually Transmitted Infections Prevalence, Incidence, and Cost Estimates in the United States. <a href="https://www.cdc.gov/std/statistics/prevalence-incidence-cost-2020.htm">https://www.cdc.gov/std/statistics/prevalence-incidence-cost-2020.htm</a>

infections among adolescents and young adults. In 2019, in Massachusetts, 59% of chlamydia cases and 32% of gonorrhea cases were reported among adolescents and young adults aged 15–24 years.<sup>3</sup>

Alarmingly, the total number of reported chlamydia cases increased by 60% from 2007 to 2016.<sup>4</sup> The age distribution of hepatitis C virus (HCV) cases reported in Massachusetts changed between 2002 and 2018 with a significant increase in cases among young persons who inject drugs.<sup>5</sup> Certain STIs disproportionately impact people of color. From 2016 to 2018, Black and Hispanic/Latino individuals represented 30% and 27% of individuals diagnosed with HIV infection in Massachusetts, respectively. Moreover, the rates among Black individuals and Hispanic/Latino individuals were seven and four times that of white (non-Hispanic) individuals, respectively.<sup>6</sup> While the greatest number of infectious syphilis cases was among white individuals each year from 2010 to 2019, from 2010 to 2019, the greatest increase in the number of infectious syphilis cases was reported among Hispanic/Latino individuals (which nearly quadrupled from 91 to 346), followed by Black (which more than doubled from 78 to 200), and white (non-Hispanic) individuals (nearly doubled from 261 to 512). Comprehensive, age-appropriate sexual health education can help combat these alarming public health trends and begin to address racial disparities in sexual health.

The Medical Society believes that any school receiving public funding should be required to offer ageappropriate comprehensive evidence-based sexual health education that:

- Is based on rigorous, peer-reviewed science; and
- Incorporates sexual violence prevention including comprehensive discussion on consent and the relationship of substance use to sexual violence; and
- Shows promise for delaying the onset of sexual activity and a reduction in sexual behavior that puts adolescents at risk for contracting human immunodeficiency virus (HIV) and other sexually transmitted infections and for becoming pregnant; and
- Includes an integrated strategy for providing both factual information and skill-building related to reproductive biology, sexual abstinence, sexual responsibility, contraceptives including condoms, alternatives in birth control, and other issues aimed at prevention of pregnancy and sexual transmission of diseases; and

<sup>&</sup>lt;sup>3</sup> Massachusetts Department of Public Health, Bureau of Infectious Disease and Laboratory Sciences. 2019 Integrated HIV/AIDS, STD and Viral Hepatitis Surveillance Report, <a href="https://www.mass.gov/doc/2019-integrated-hivaids-std-and-viral-hepatitis-surveillance-report-pdf/download">https://www.mass.gov/doc/2019-integrated-hivaids-std-and-viral-hepatitis-surveillance-report-pdf/download</a>.

<sup>&</sup>lt;sup>4</sup> CDC Youth Risk Behavior Surveillance System, 2017 YRBS Data and Results https://www.cdc.gov/healthyyouth/data/yrbs/index.htm

<sup>&</sup>lt;sup>5</sup> Massachusetts Department of Public Health, Bureau of Infectious Disease and Laboratory Sciences. 2019 Integrated HIV/AIDS, STD and Viral Hepatitis Surveillance Report. <a href="https://www.mass.gov/doc/2019-integrated-hivaids-std-and-viral-hepatitis-surveillance-report-pdf/download">https://www.mass.gov/doc/2019-integrated-hivaids-std-and-viral-hepatitis-surveillance-report-pdf/download</a>

- Utilizes classroom teachers and other professionals who have shown an aptitude for working with
  young people and who have received special training that includes addressing the needs of sexual
  and gender minority youth; and
- Appropriately and comprehensively address the sexual behavior of all people, inclusive of sexual and gender minorities; and
- Includes ample involvement of parents, health professionals, and other concerned members of the community in the development of the program; and
- Is part of an overall health education program; and
- Includes culturally competent materials that are language-appropriate for Limited English Proficiency (LEP) pupils without sacrificing comprehensiveness.

The MMS commends <u>newly approved</u> Health and Physical Education Framework from the Department of Elementary and Secondary Education, but without the passage of the Healthy Youth Act, these thoughtful guidelines could fall by the wayside of future administrations. Massachusetts youth need H.544/S.268 to codify their right to comprehensive and inclusive education and to collect routine data on what is being taught across the Commonwealth.

To be most effective, sexual health education should promote a perception of sexuality that is free from shame, blame, and stigma and prepare individuals to make healthy sexual decisions. *An Act Relative to Healthy Youth* would make considerable progress toward ensuring that the youth of Massachusetts who receive sexual health education are taught an evidence-based curriculum that is comprehensive and medically accurate. For these reasons, we urge the committee to act favorably on H.544/S.268.