Testimony - Support HB0161.pdf Uploaded by: Dawn Sacks Position: FAV

Education, Energy and the Environment Committee HB0161 - Compressive Health Education Framework Position - Favorable

I'm writing today to urge the Education, Energy and the Environment Committee to support HB0161, the Compressive Health Education Framework bill, which will update our current legislation around Health Education.

This bill will make sure that our children receive the education they need to foster their physical, emotional, and mental health and well-being now and throughout their lives. Having read the current Framework, I appreciate the medically accurate, scientific, research-based, best-in-class way our State Department of Education presents the knowledge our children need to thrive.

I understand some people are concerned about portions of the Framework dealing with sexuality. I believe, as evidenced in the current Framework, that our Department of Education has incorporated these topics appropriately. And I trust that, as outlined in the bill, my county board of education will develop a specific curriculum that addresses these subjects in a way that fulfills the law while accounting for community review and input. And I am pleased to see that there is an opt-out available for parents who prefer their children not attend certain classes.

This is a bill that I wish had been in effect when I was growing up. I both experienced and was witness to episodes of sexually charged activities that I wish I had been better prepared to handle. All children, at appropriate age levels, need to develop awareness of and options for responding to a variety of situations. This bill will help accomplish that in a way that makes all children more confident and comfortable.

This bill will help educate and protect all our children in many ways. It will:

- Teach children about respecting other people's differences
- Teach children that they and every child deserve to be treated with kindness
- Help children who have a different family structure feel seen and welcomed
- Help children who do not have adults in their lives with the wherewithal or knowledge to help them understand health issues, of any kind, they may be dealing with

I urge all committee members to support this bill and move it forward with a favorable report to the Senate.

Thank you for your time and consideration today.

Dawn Sacks Harford County, Maryland

Senate Reading HB161 2025 NAPNAP.pdf Uploaded by: JD Murphy

Position: FAV



March 18th, 2025

Maryland Senate Education, Energy, and the Environment Committee 2 West Miller Senate Office Building Annapolis, Maryland 21401

Dear Honorable Chair, Vice-Chair, and Members of the Committee:

On behalf of the pediatric nurse practitioners (PNPs) and fellow pediatric-focused advanced practice registered nurses (APRNs) of the National Association of Pediatric Nurse Practitioners (NAPNAP) MD Chesapeake Chapter, we are writing to express our **support of HB161: Primary and Secondary Education - Comprehensive Health Education Framework – Established.**

We support the provision of comprehensive, evidence-based, and age-appropriate health education in both primary and secondary schools. This framework of health education includes topics that are critical to the health, growth and development of youth. These topics include: health promotion, mental and emotional health, substance abuse prevention, family life and human sexuality, gender identity and sexual orientation, safety and violence prevention, healthy eating, and disease prevention and control. The bill is a matter of public health and in a time when science is increasingly being ignored, we urge the Maryland legislature to trust the advice of the health professionals that have dedicated their lives to helping children.

Without comprehensive education programs in the schools, many students will not have an opportunity to gain the education and insight that would be provided through this curriculum. While some parents may feel this education is uncomfortable, there is significant evidence that supports the benefits of early discussions of family life, human sexuality, gender identity, and sexual orientation topics. A comprehensive review was published in 2021, summarizing the impact of comprehensive sex ed, which include reduction of homophobia, bullying, intimate-partner violence (IPV), sexual victimization including child sexual abuse, increased bystander intervention related to abuse and IPV, and improved communication skills in relationships, disclosure of dangerous behaviors to trusted adults, and social-emotional learning, such as increased self-esteem and body image¹. Allowing parents to prevent their children from learning about these subject matters denies these children access to critical information can impact their overall development and disallow the possible prevention of a sexual transmitted disease including HIV, teen pregnancy, or IPV.

The bill would help to end the current alternative curriculum being encouraged within Carroll County Public Schools, which sets a dangerous precedent by allowing biased groups to influence and dictate curriculum based on personal opinions. We have evidence that this option is being pushed as the first option, creating an "opt-in" approach, with members of our organization who are CCPS parents being contacted eight or more times to select their choice of health curriculum, contrary to current COMAR guidelines of "opt-out." The CCPS exclusionary health curriculum option is detrimental to the mental health and wellbeing of LGBTQIA+ youth and their families, and is associated with higher rates of bullying, mental distress, and suicide. Parents in same-sex partnerships or parents of these youth are being denied their rights to exist without discrimination and exclusion. It is a fabrication for some to



state there is no consensus regarding these issues, as all of the top medical and psychological associations all adamantly support inclusion, support, and affirmation regarding LGBTQIA+ youth². Sexual identity is no more of a choice than someone's race or genetic ancestry, so should be treated as such without segregation of educational curriculum. All parents are encouraged to use their parental rights and will continue to have the ability to opt-out of certain educational topics, but having a public school system clearly supporting exclusion of certain groups while ignoring evidence-based practices is not appropriate, and we are concerned about how this could further spread.

For these reasons the Maryland Chesapeake Chapter of NAPNAP extend sour **support of HB161**: **Primary and Secondary Education - Comprehensive Health Education Framework – Established.** The pediatric advanced practice nurses of your state are grateful to you for your attention to these crucial issues. The MD Chesapeake Chapter of the NAPNAP membership includes over 200 primary and acute care pediatric nurse practitioners who are committed to improving the health and wellbeing of and advocating for Maryland's children. If we can be of any further assistance, or if you have any questions, please do not hesitate to contact the Chesapeake Chapter legislative committee or president, Dr. Yvette Laboy at <u>mdchesnapnapleg@outlook.com</u>.

Sincerely,

Muette Laboy

Dr. Yvette Laboy DNP, CPNP-AC, CCRN, CPN National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter President

Ergenia Ogordova

Dr. Evgenia Ogorodova DNP, CPNP-PC National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter Legislative Co-Chair

Lindsay Ward

Ms. Lindsay Ward MSN, CPNP-PC, IBCLC National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter Immediate Past-President

the

Dr. Jessica D. Murphy DNP, CPNP-AC, CPHON, CNE National Association of Pediatric Nurse Practitioners (NAPNAP) Chesapeake Chapter Legislative Co-Chair

1. Eva S., and Lisa D. Lieberman. "Three Decades of Research: The Case for Comprehensive Sex Education." *Journal of Adolescent Health* 68, no. 1 (January 2021): 13–27. <u>https://doi.org/10.1016/j.jadohealth.2020.07.036</u>.

1. GLAAD. "Medical Association Statements in Support of Health Care for Transgender People and Youth." GLAAD, June 26, 2024. https://glaad.org/medical-association-statements-supporting-trans-youth-healthcare-and-against-discriminatory/.

2025 MASHN HB 161 Senate Side.pdf Uploaded by: Jennifer Navabi

Position: FAV

Maryland Association of School Health Nurses



Committee:	Senate Environment, Energy, and Transportation Committee
Bill Number:	House Bill 161 - Primary and Secondary Education - Comprehensive Health Education Framework – Established
Hearing Date:	March 20, 2025
Position:	Support

The Maryland Association of School Health Nurses (MASHN) supports *House Bill 161 – Primary and Secondary Education – Comprehensive Health Education Framework – Established.* The bill would support the provision of comprehensive health education to K-12 students across Maryland. MASHN supports this legislation because there is a strong body of peer-reviewed research that demonstrates the positive impact of comprehensive health education. The Centers for Disease Control and Prevention cite robust curriculum as factor in the success of health education. A quality program "as early as possible can help youth develop positive well-being, academic success, and healthy outcomes into adulthood.ⁱ

We ask for a favorable vote. If we can provide any information, please contact Robyn Elliott at <u>relliott@policypartners.net</u>.

ⁱ https://www.cdc.gov/healthy-youth/what-works-in-schools/quality-health-education.html

HB0161 Primary and Secondary Education - Comprehen Uploaded by: Jeremy Browning

Position: FAV



Bill Title: Primary and Secondary Education -Comprehensive Health Education Framework -Established

Bill Number(s): HB0161

Position: FAVORABLE

Date: January 27, 2025

Submitted by: Jeremy Browning, Director of the Maryland Commission on LGBTQIA+ Affairs

To:

House Ways and Means Committee

The Hon. Vanessa E. Atterbeary, Chair The Hon. Jheanelle K. Wilkins, Vice Chair

Senate Education, Energy, and the Environment Committee

The Hon. Brian J. Feldman, Chair The Hon. Cheryl C. Kagan, Vice Chair

Testimony on behalf of the Maryland Commission on LGBTQIA+ Affairs:

The Maryland Commission on LGBTQIA+ Affairs, created by the Maryland General Assembly, works to serve LGBTQIA+ Marylanders by galvanizing community voices, researching and addressing challenges, and advocating for policies that advance equity and inclusion. The Commission envisions a Maryland where all LGBTQIA+ people can live full and authentic lives. As a vital resource, the Commission collaborates with public officials, agencies, and community partners to ensure the rights and dignity of LGBTQIA+ Marylanders are protected and respected.

On behalf of the Maryland Commission on LGBTQIA+ Affairs we strongly support House Bill 161 to create a comprehensive health education framework. This bill is a critical step towards ensuring that all students receive inclusive, age-appropriate and evidence-based education on various health topics, including gender identity and sexual orientation.

The Commission has extensively researched and analyzed the experiences of LGBTQIA+ youth in our state's education system. Reports such as the <u>2021 GLSEN National School Climate</u> <u>Survey</u> and the <u>GLSEN 2021 Maryland State Snapshot</u> reveal distressing data regarding the safety and well-being of LGBTQIA+ students in Maryland's schools.

These reports consistently demonstrate that Maryland's K-12 schools are frequently unsafe and hostile environments for LGBTQIA+ students. They experience alarming rates of bullying,

harassment, assault, and discrimination from multiple sources, including peers, educators, administrators, and even family members. The consequences of this hostility are severe, leading to lower academic achievement, diminished mental health, and increased risk of suicidal ideation and behavior among LGBTQIA+ youth.

According to the <u>Maryland Department of Health 2021-2022 Youth Risk Behavior Survey and</u> <u>Youth Tobacco Survey</u> findings, students identifying as LGBTQ+ were more likely to report more risk behaviors measured on the survey compared to their heterosexual and cisgender counterparts.

Providing comprehensive health education that includes topics such as gender identity and sexual orientation is essential for promoting the well-being and safety of all students, regardless of their sexual orientation or gender identity. By requiring each county board of education to create an age-appropriate curriculum consistent with the comprehensive health education framework outlined in House Bill 161, we can ensure that students receive accurate and affirming information that reflects the diversity of our public schools and communities.

For these reasons, the Maryland Commission on LGBTQIA+ Affairs strongly urges a favorable report on House Bill 161.

REFERENCES:

GLSEN. (2023). School Climate for LGBTQ+ Students in Maryland 2021 State Snapshot: Maryland):

https://maps.glsen.org/wp-content/uploads/2023/02/GLSEN_2021_NSCS_State_Snapshots_M D.pdf

GLSEN. The 2021 National School Climate Survey Executive Summary: <u>https://www.glsen.org/sites/default/files/2022-10/NSCS-2021-Executive_Summary-EN.pdf</u>

Maryland Department of Health: 2021-2022 Youth Risk Behavior Survey and Youth Tobacco Survey: <u>https://health.maryland.gov/phpa/ccdpc/Reports/Pages/YRBS-Main.aspx</u>

HB161 - Favorable - One Pasadena 2025.pdf Uploaded by: John Jasen

Position: FAV

Education, Energy, and the Environment House Bill 161 Favorable Report

Honorable Chair Feldman, Vice Chair Kagan, and Members of the Education, Energy, and the Environment Committee;

Please give House Bill 161, regarding a comprehensive health education framework, a favorable report.

One Pasadena: Building a Safe and Inclusive Community is an anti-bigotry group that works to change the culture of hate in Pasadena, Maryland. In Pasadena, a transgender teacher and a student in the GSA were repeatedly harassed, bullied, and threatened by parents and youth. Some students were even assaulted just for being Queer. Obviously, the bullies in the school are learning their behavior from their parents. However, there is hope that those teens will stop the cycle of bigotry if they're better educated.

We urge you to support House Bill 161, keeping the Gender Identity and Sexual Orientation topic intact and required. Thank you for your consideration.

Sincerely, The One Pasadena Steering Committee Pasadena, MD

Health Ed - K-12 - testimony - House in Senate - 2 Uploaded by: Lisae C Jordan

Position: FAV



Working to end sexual violence in Maryland

P.O. Box 8782 Silver Spring, MD 20907 Phone: 301-565-2277 Fax: 301-565-3619 For more information contact: Lisae C. Jordan, Esquire 443-995-5544 www.mcasa.org

Testimony Supporting House Bill 161 Lisae C. Jordan, Executive Director & Counsel March 20, 2025

The Maryland Coalition Against Sexual Assault (MCASA) is a non-profit membership organization that includes the State's seventeen rape crisis centers, law enforcement, mental health and health care providers, attorneys, educators, survivors of sexual violence and other concerned individuals. MCASA includes the Sexual Assault Legal Institute (SALI), a statewide legal services provider for survivors of sexual assault. MCASA represents the unified voice and combined energy of all of its members working to eliminate sexual violence in the State of Maryland. We urge the Education, Energy & Environment Committee to report favorably on House Bill 161.

House Bill 161 – K-12 Comprehensive Health Education

This bill will mandate a comprehensive health education for students in K-12. MCASA notes and appreciates that this specifically includes issues vital to preventing sexual assault and promoting health relationships, including:

(IV)FAMILY LIFE AND HUMAN SEXUALITY(V) GENDER IDENTITY AND SEXUAL ORIENTATION(VI) SAFETY AND VIOLENCE PREVENTION

This bill is particularly strong because it approaches health education holistically and will permit educators to develop curricula that respond to the needs of students. By including the broad spectrum of topics, the Comprehensive Education Framework will help create a cohesive and sensical approach to related topics such as sexuality, consent, and abuse prevention.

As the Committee considers this important legislation, MCASA urges it to remember that some children are in abusive, violent, and unsupportive homes. Most parents are wonderful, but some are not. A full curricula, including topics addressing sensitive issues such as healthy relationships and sexuality, can be a life line for students who are in desperate need of help. Please also be mindful that some schools in Maryland are refusing to provide students with this important information and even banning emotionally supportive symbols like rainbows. Depriving children of support at school just makes them more vulnerable. HB161 will help support all of Maryland's children.

The Maryland Coalition Against Sexual Assault urges the Education, Energy & Environment Committee to report favorably on House Bill 161

HB0161 crossover FAV - Primary and Secondary Educa Uploaded by: Richard KAP Kaplowitz

Position: FAV

HB0161_Crossover Bill_RichardKaplowitz_FAV 03/20/2025 Richard Keith Kaplowitz Frederick, MD 21703

TESTIMONY ON CROSSOVER BILL HB0161- POSITION: FAVORABLE

Primary and Secondary Education - Comprehensive Health Education Framework – Established

TO: Chair Feldman, Vice Chair Kagan, and members of the Education, Energy, and the Environment Committee **FROM**: Richard Keith Kaplowitz

My name is Richard Keith Kaplowitz. I am a resident of District 3, Frederick County. I am submitting this testimony in support of crossover bill HB0161, **Primary and Secondary Education - Comprehensive Health Education Framework – Established**

The House bill HB0161 passed with amendments 95-39 on 02/14/25. There was no cross-filed Senate bill.

The American Academy of Pediatrics has documented *The Importance of Access to Comprehensive Sex Education*¹

Impacts of a lack of comprehensive sex education for all youth can include: Less use of condoms, leading to higher risk of STIs, including HIV. Less use of contraception, leading to higher risk of unplanned pregnancy. Less understanding and increased stigma and shame around the spectrum of gender and sexual identity.

This bill acknowledges this conclusion from a respected medical academy and would require the State Department of Education, in collaboration with the Maryland Department of Health, to develop a comprehensive health education framework. It would instruct each county board of education as a requirement to create an age-appropriate curriculum that is consistent with the comprehensive health education framework. For those who believe in their parental rights to determine what and when their child is introduced to any of these concepts it requires each county board to establish policies, guidelines, and procedures for a parent or guardian to opt out of the family life and human sexuality topics for a certain student, subject to a certain prohibition.

The National Center for Health Statistics ² in 2022 found that there were 10.9 (births per 1,000 females 15-19 years of age). This bill contemplates Maryland driving that birth rate for teens down by education. I respectfully urge this committee to return a favorable report on crossover bill HB#/0161.

¹ <u>https://www.aap.org/en/patient-care/adolescent-sexual-health/equitable-access-to-sexual-and-reproductive-health-care-for-all-youth/the-importance-of-access-to-comprehensive-sex-education/#:~:text=Impacts%20of%20a%20lack%20of,of%20gender%20and%20sexual%20identity.</u>

² <u>https://www.cdc.gov/nchs/pressroom/states/maryland/md.htm</u>

2025 ACNM HB 161 Senate Side.pdf Uploaded by: Robyn Elliott

Position: FAV



Committee:	Senate Committee on Education, Energy, and the Environment
Bill:	House Bill 161 - Primary and Secondary Education - Comprehensive Health Education Framework - Established
Hearing Date:	March 20, 2025
Position:	Support

The Maryland Affiliate of the American College of Nurse Midwives (ACNM) supports House Bill 161 - Primary and Secondary Education - Comprehensive Health Education Framework - Established. The bill requires the Maryland State Department of Education (MSDE) in consultation with the Maryland Department of Health, to develop a comprehensive health education framework. The framework should include health promotion, mental and emotional health, substance abuse prevention, family life and human sexuality, gender identity and sexual orientation, safety and violence prevention, safe and appropriate social media and internet use, healthy eating, and disease prevention and control. A parent or guardian can opt out of the family life and human sexuality topic.

Providing comprehensive and age-appropriate health education is critical to enhancing the health and well-being of children and adolescents. There is strong evidence that comprehensive health education reduces the risk of pregnancy, transmission of sexual transmitted infections including HIV, and sexually abusive relationships.ⁱ

We ask for a favorable report on this legislation. If we can provide any further information, please contact Robyn Elliott at <u>relliott@policypartners.net</u> or (443) 926-3443.

ⁱ Chin HB et al. Community Preventive Services Task Force. The effectiveness of group-based comprehensive riskreduction and abstinence education interventions to prevent or reduce the risk of adolescent pregnancy, human immunodeficiency virus, and sexually transmitted infections: two systematic reviews for the Guide to Community Preventive Services. Am J Prev Med. 2012 Mar;42(3):272-94. doi: 10.1016/j.amepre.2011.11.006. PMID: 22341164.

HB0161 Favorable.pdf Uploaded by: Wendy Novak Position: FAV

Primary and Secondary Education - Comprehensive Health Education Framework – Established

TO: Chair Feldman, Vice Chair Kagan, and members of the Education, Energy, and the Environment Committee

FROM: Wendy Novak, Carroll County, Maryland

I'm a member of the Maryland Commission for LGBTQIA+ Affairs, a resident of Carroll County, and a parent of a high school student that witnesses hate in schools. They have heard students saying that only white people are LGBTQ. They have been told that if you are or support LGBTQ people, you are going to hell and have even witnessed class discussions on the gender identity of a specific student present in the classroom. Our LGBTQ students are more likely to miss school out of fear for their safety, and more likely to be physically harmed on school campuses.

The Maryland Department of Education was concerned about these facts and created the Maryland Comprehensive Health Education Framework. I support this bill because it codifies the overall concepts listed in the framework by establishing a "floor" for what is taught as part of the Maryland health education curriculum. It leaves the particulars of the framework up to the Counties and State Dept. of Education while guaranteeing an inclusive curriculum for all students. This allows each district to tailor the materials for its students and consider a wide range of stakeholders when developing the content. It contains and affirms the long-standing opt-out for Family Life and Human Sexuality, allowing parents to exercise their discretion over what is taught to their children-- and it also guarantees that the rest of the curriculum is inclusive of and representative for all students. This opt-out provides a compromise for those parents that do not wish their children to receive the Family Life and Human Sexuality topic. The topics in the comprehensive health framework are crucial to our students' education. An educated student will make better decisions for their health.

Our public schools have a responsibility to include all students, regardless of sexual orientation, gender identity, and gender expression. The parents claiming that children should be protected from knowing our LGBTQ community members exist and calling affirming parents hateful names are teaching hate to their children. They will not be teaching their children accurate information about the LGBTQIA+ community. Regardless of what a parent believes or not, their student will encounter LGBTQIA+ students, staff, or faculty. This bill ensures students will receive an accurate education about LGBTQIA+ topics. Students receiving an inclusive health education will be better empowered to make healthy decisions. Inclusive health education benefits all, not just our LGBTQIA+ students, by improving the school climate, and reducing the stigma and marginalization of our LGBTQIA+ students.

Students are the stakeholders; they have the right to a comprehensive education.

I request a favorable report on HB161.

Baur testimony HB161.pdf Uploaded by: Cynthia Baur Position: FWA



HERSCHEL S. HOROWITZ CENTER FOR HEALTH LITERACY Cynthia Baur, PhD Endowed Chair and Director, Horowitz Center for Health Literacy O: 301.405.0388 | F: 301.405.8397 cbaur@umd.edu | sph.umd.edu

4200 Valley Drive Room 2367 College Park, Maryland 20742

FAVORABLE WITH AMENDMENTS House Bill 161 Primary and Secondary Education - Comprehensive Health Education Framework - Established Hearing March 20, 2025

I encourage a Favorable with Amendments report on HB161 for the following reasons.

This bill provides for a comprehensive school education framework that local jurisdictions will develop. Maryland students can benefit from greater knowledge and understanding of a range of health topics, and the bill names a minimum list of topics that the framework must include. In addition to specific health knowledge, however, students can benefit from a comprehensive set of health literacy skills that provide lifelong abilities to find, understand and use health information and services.

Therefore, the list in HB161 is missing a required element of K-12 school health specified in HB1082 Maryland Consumer Health Information Hub that became law in 2022. In HB1082, the Hub as implemented by the University of Maryland School of Public Health Horowitz Center for Health Literacy is supposed to provide "educational and age-appropriate resources that teach students health literacy and health literacy skills for primary and secondary schools and institutions of higher education" [HB1082, 20-2205,(B)(2)]. It would be redundant and counterproductive for the Hub to develop health literacy resources and counties to develop their health topic framework separately and in parallel.

I suggest the following amendment to align HB161 with HB1082.

- 1. Add text referencing health literacy at 7-401(c)(4)(I).
 - *a.* Rewrite "Each county board shall create an age-appropriate curriculum that is consistent with the comprehensive health education framework" to "Each county board shall create an age-appropriate curriculum that is consistent with the comprehensive health education framework *and health literacy skill-building.*

I believe this minor edit will align two very important health education initiatives that can help students and their families be informed about and manage their health.

Cynthia Baur Cynthia Baur Director, Horowitz Center for Health Literacy

HB 161 FWA 2025.pdf Uploaded by: Debi Jasen Position: FWA

Education, Energy and the Environment House Bill 161 <u>Favorable with Amendments</u>

Honorable Chair, Vice Chair, and Members of the Education, Energy, and the Environment Committee;

Please give House Bill 161, regarding a comprehensive health education framework, a FAVORABLE report (with amendments.)

Health education is incredibly important for the present and futures of our children. An accurate education about human sexuality is especially important because it can be much more difficult to find online.

I really appreciate that the sponsors of House Bill 161 recognize the existence of LGBTQ+ people and want to require an education encompassing gender identity and sexual orientation. I hope that remains intact in the bill.

I would like for House Bill 161 to be amended by removing (5) (I) and (5) (III), where parents are allowed to opt out of the Family Life and Human Sexuality portion of health education, and where teachers must provide alternatives. People who have elected to utilize the public schools should not have the right to opt their children out of portions of it. It is the responsibility of a public education system to educate the children in those schools. If the parents don't want for their children to learn what is in the public school curricula, they should homeschool or put their children in private schools. There are plenty of ways to make either of those options work. Family life and human sexuality topics are even more important than classes like algebra, and parents wouldn't be permitted to opt their children out of math classes in a public school no matter how misinformed they are about Arabic numerals.

I urge you to give House Bill 161 a favorable report, and to remove the opt out parts of the bill. Thank you for your consideration.

Sincerely, Debi Jasen Pasadena, MD

Trans Rights Advocacy Coalition – HB161 – FWA(2).p Uploaded by: Ericka McDonald

Position: FWA



House Bill 161 Primary and Secondary Education - Comprehensive Health Education Framework - Established March 20, 2025 Favorable With Amendment

Dear Chair Feldman, Vice Chair Kagan, and members of the Education, Energy, and Environment Committee,

The Trans Rights Advocacy Coalition (TRAC) is a Maryland-led group of organizations, health care providers, and advocates seeking to improve the wellbeing of transgender Marylanders and ensure health equity across the state. TRAC has led legislative efforts to enact bills to provide and protect gender-affirming care in Maryland. These bills, along with Governor Moore's executive order declaring Maryland a Trans Sanctuary State, demonstrate clear support for the health and well being of transgender Marylanders.

TRAC **strongly supports HB 161 with amendments** to create a comprehensive health education framework, inclusive of gender identity and sexual orientation. This bill is vitally important to ensuring LGBTQ+ youth are represented in school health education, which is why *we require an amendment to remove the parental opt out of the human sexuality topic*. The opt out language is discriminatory and negates the framework's goal of providing health education on gender identity and sexual orientation to all students.

The State Department of Education established the health education framework in June 2021, intentionally including topics on gender identity and sexual orientation.¹ The following year, Carroll County's school board voted to remove this content from their health curriculum, which prompted the need to enforce the required content.² The opt out language defeats the intent of HB161 - to strengthen enforcement of the health education framework - and endangers the safety and wellbeing of LGBTQ+ youth in Maryland.

The hostile political environment created by the Trump administration has worsened the discrimination against LGBTQ+ students in Maryland. Research shows that LGBTQ+ inclusive curriculums have life-saving

¹<u>Maryland Comprehensive Health Education Framework</u> June 2021 See Standard 1C Family Life and Human Sexuality

² <u>New bill reignites debate over LGBTQ-inclusive school health curriculum</u> aired on WYPR March 12, 2024

impacts.³ The 2021 Gay, Lesbian, and Straight Education Network (GLSEN) Survey found that only 13% of schools discussed LGBTQ+ issues in assignments. LGBTQ+ students in schools with an LGBTQ+-inclusive curriculum feel greater belonging, were less likely to miss school, and less likely to to have considered suicide compared to students in schools without an inclusive curriculum.⁴⁵

The Trevor Project 2024 survey on the mental health of LGBTQ+ youth found that 39% of LGBTQ+ young people seriously considered attempting suicide in the past year, including 46% of transgender and nonbinary young people. The study also found a direct correlation between accepting communities and decreased risk of suicide⁶

Health curriculums that include gender identity and sexual orientation are well studied and proven to positively impact the lives of LGBTQ+ students. For example, a study in the *Journal of School Nursing* found that sexual minority students who received decidedly heteronormative and exclusive sex education, demonstrate higher levels of anxiety.⁷ Another study published in *Journal of Adolescent Health* shows that students in states with a greater proportion of LGBTQ-inclusive sex education have lower odds of experiencing school-based victimization and adverse mental health. The authors suggest that the findings be used to guide intervention development at the school and state levels.⁸

Additionally, leading medical organizations also support inclusive health education. For example, the American Medical Association Health Education policy urges schools at all education levels to implement comprehensive, developmentally appropriate sexuality education programs that appropriately and comprehensively address the sexual behavior of all people, inclusive of sexual and gender minorities..⁹ The American Psychological Association advises that inclusive curriculums benefit all youth, including cis gendered and straight students, improving school climates and healthy relationships for everyone.¹⁰

It's essential for the health, well being, and academic success of LGBTQ+ students that they are included in the health curriculum in Maryland. **The Trans Rights Advocacy Coalition strongly urges a favorable** with amendment report on HB 161.

³ <u>APA statement on inclusive curriculum</u> American Psychological Association recommend LGBTQ+ inclusive curriculum, including sex education.

⁴ GLSEN National School Climate Survey Executive Summary

⁵ <u>GLSEN School Climate for LGBTQ+ Students in Maryland</u>

⁶ Trevor Project <u>2024 US National Survey on the Mental Health of LGBTQ+ Young People</u>

⁷ Epps B, Markowski M, Cleaver K. <u>A Rapid Review and Narrative Synthesis of the Consequences of</u> <u>Non-Inclusive Sex Education in UK Schools on Lesbian, Gay, Bisexual, Transgender and Questioning Young</u> <u>People</u>. *J Sch Nurs*. 2023 Feb;39(1):87-97.

 ⁸ Proulx CN, Coulter RWS, Egan JE, Matthews DD, Mair C. <u>Associations of Lesbian, Gay, Bisexual,</u> <u>Transgender, and Questioning-Inclusive Sex Education With Mental Health Outcomes and School-Based</u> <u>Victimization in U.S. High School Students.</u> *J Adolesc Health*. 2019 May;64(5):608-614.
⁹ AMA Health Education Policy (2024)

¹⁰ <u>APA statement on inclusive curriculum</u> American Psychological Association recommend LGBTQ+ inclusive curriculum, including sex education.

2025 HB0161 SBE Testimony Against 2025-03-20.pdf Uploaded by: Alan Lang

Position: UNF

Honorable Senators

Please enter an unfavorable report against HB0161.

Currently, each local board of education must establish policies, guidelines, and procedures for a parent or guardian to opt their student out of the family life and human sexuality topic. I agree with that policy. However, I strongly disagree with the change that a local board <u>may not</u> <u>authorize</u> a parent or guardian to opt the student out of the teaching of Gender Identity and Sexual Orientation

I urge you to read the joint testimony of the Maryland State Department of Education and the State Board of Education who urged the Delegates to enter an unfavorable report. I also urge you to read the testimony of Howard County School Board who urged the Delegates to enter an unfavorable report. They said in part

<u>The Maryland State Department of Education (MSDE) wrote a January letter in</u> <u>opposition of H.B. 161 that described the legislation as unnecessary because it repeats</u> <u>aspects of Maryland law. The letter stated the bill would "run counter to the process</u> <u>entrusted to the State Board and MSDE</u>."

<u>The Howard County Public School Board, which oversees education in Atterbeary's</u> <u>district, wrote a January letter in opposition of the bill in a letter that expressed concerns</u> <u>about government overreach.</u>

"<u>Legislation that limits local board decision-making authority may weaken the Board's</u> bond with the local community and adversely impact the community's participation in the governance and operation of the school system,".

I strongly support their positions.

Consequently, I and like-minded parents believe we should still be allowed to have our children opt out of the proposed Gender Identity and Sexual Orientation module for this framework.

Please enter an unfavorable report against HB0161.

Alan Lang Legislative District 30B 45 Marys Mount Road Harwood, Maryland 20776 410-336-9745 Alanlang1@verizon.net

March 20, 2025

HB 161 - Comprehensive Health Education Framework Uploaded by: Brian Dulay

Position: UNF



621 Ridgely Avenue, Suite 300, Annapolis, Maryland 21401 410-841-5414 · 800-841-8197 · Fax: 410-841-6580 · MABE.org

BILL:	House Bill 161
TITLE:	Primary and Secondary Education - Comprehensive Health
	Education Framework - Established
HEARING DATE:	March 20, 2025
POSITION:	UNFAVORABLE
COMMITTEE:	Education, Energy, and the Environment
CONTACT:	Sam Mathias, Legal & Policy Services Director
	smathias@mabe.org

The Maryland Association of Boards of Education (MABE) opposes House Bill 161. This legislation is not necessary to require the Maryland State Department of Education (MSDE), in collaboration with the Maryland Department of Health (MDH), to develop a comprehensive health education framework. This is because these agencies and a broad group of other stakeholders have already done so. MABE's opposition to this health framework and curriculum bill is firmly grounded in the association's adopted legislative positions, which affirm that MABE:

- Supports local decision-making authority in developing curriculum, assessments, grading policies, and instructional programs and the adoption of statewide laws and regulations reflecting a commitment to local governance, professional judgment of local educators, and community engagement; and
- Opposes any efforts by the General Assembly to legislate curriculum or testing matters inconsistent with MABE's adopted resolutions and legislative positions.

MSDE approved a revised health education framework in 2021, based on regulations updated in 2019. The "Maryland Comprehensive Health Education Framework: Pre-Kindergarten through 12th Grade" was drafted and reviewed by representatives from local school systems, MSDE, the Maryland Department of Health, University of Maryland School of Medicine, Johns Hopkins Bloomberg School of Public Health, American Academy of Pediatrics, Advocates for Youth, and a parent and high school student. Since 2021, local boards have been engaging their parents and local communities to devise their local curriculum, including the approved option for parents to have their children opt out of the Health and Human Sexuality instruction. MABE strongly supports this process of state standard development followed by flexible local curriculum development through community engagement.

MABE opposes this legislation for the reasons outlined above and to avoid setting the precedent that other content standards, curriculum, and instructional materials may become the subject of legislation. In Maryland, the authority to adopt curriculum, courses



of study, and the selection of textbooks resides with each local board of education and superintendent. Examples of state laws establishing curriculum are limited, including specific subject matters such as agriculture, computer science, and cardiopulmonary resuscitation. The State Board of Education has approved regulations that contain more specific requirements to provide instructional programs in specific content areas and to include the content standards set forth in the curricular frameworks. The MSDE Protocol for Developing and Revising Standards defines the state frameworks as guides for school systems as they develop local school curricula. Again, MABE endorses this process and opposes a shift to legislating on curriculum matters more appropriately governed by State Board policy, guidance, and formally adopted regulations.

For these reasons, MABE requests an unfavorable report on House Bill 161.

HB161 opposition letter.pdf Uploaded by: Charlene Sharpe Position: UNF

TEL: 410-632-1194 FAX: 410-632-3131 WEB: www.co.worcester.md.us

> COMMISSIONERS THEODORE J. ELDER, PRESIDENT ERIC J. FIORI, VICE PRESIDENT CARYN G. AEBOTT ANTHONY W. BERTINO, JR. MADISON J. BUNTING, JR. JOSEPH M. MITRECIC DIANA PURNELL



OFFICE OF THE COUNTY COMMISSIONERS

Morcester County

GOVERNMENT CENTER ONE WEST MARKET STREET • ROOM 1103 SNOW HILL, MARYLAND

21863-1195

WESTON S. YOUNG, P.E. CHIEF ADMINISTRATIVE OFFICER CANDACE I. SAVAGE, CGFM DEPUTY CHIEF ADMINISTRATIVE OFFICER ROSCOE R. LESLIE COUNTY ATTORNEY

February 24, 2025

Education, Energy and the Environment Committee Miller Senate Office Building, 2 West Wing 11 Bladen Street Annapolis, MD 21401

RE: House Bill 161

Dear Chair Feldman and Committee Members:

Worcester County opposes House Bill 161. This bill would require the Maryland State Department of Education to work with the Maryland Department of Health to develop a comprehensive health education framework. At the same time, this bill would require each county board of education to create an age-appropriate curriculum that is consistent with that framework while also developing policies, guidelines and procedures for a parent or guardian to opt out of the family life and human sexuality topics subject to a certain prohibition.

Curriculum should be a local school system concern, not the subject of legislation. Local school systems need the flexibility to implement the curriculum that makes sense for their students.

We are also firm believers in parental rights. Parents should have the ability to opt their child out of any component of the comprehensive health education framework.

Worcester County opposes HB 161 and we urge you to provide an unfavorable report. Thank you for your time.

Sincerely, left Theodore J Elder

Theodore J/Eld President

Citizens and Government Working Together

MyMGA written response.pdf Uploaded by: Deserie Mowlds Position: UNF

Greetings,

I am against this bill. If this bill passes, I will have to make it a priority to not vote in a democrat on the next election.

How sad that the government is doing its best to be irresponsible with taxpayers dollars, health and welfare. Nauseating to consider how they are putting children in danger. Disgusting to see all the additional fees, taxes and tolls that Maryland is considering verses balancing the budget with less spending and not allowing the teachers union to run our government.

As a retiree, I am considering moving from Maryland due to the poor leadership of our State legislators.

Please pay attention to what the people want.

Deserie Mowlds

OPPOSITION TESTIMONY HB0161.pdf Uploaded by: Glen Geelhaar

Glen Geelhaar 2514 Windsor Rd Parkville, Maryland 21234 March 18, 2025

Testimony in opposition of HB0161 Primary and Secondary Education - Comprehensive Health Education Framework – Established

Dear Chair Senator Brian J. Feldman and Members of the Committee

Thank you for providing me the opportunity to testify in opposition of House Bill HB0161.

It is bills like this one that discourages parents from being involved in education. Why should they? It feels like nobody is listening.

Like many policies enacted today, politicians on a power trip seem to feel that they know what is best for their royal subjects! They want to tell you what kind of car you are allowed to drive, what kind of stove you are allowed to buy, and take away your right as a parent to opt out of sexually explicit educational topics!

Enough is enough! If this were a movie, HB0161 would carry an R rating, not suitable for children under the age of 17!

It doesn't have to be this way. With your no vote, you will let parents know that they are a valued partner in education. Kids thrive when they have parents who are involved, so please turn this ship around.

This is why I strongly urge you to vote no on HB0161 and allow parents to have a say!

Thanks,

Glen Geelhaar 443 695-3556

Senate HB0161.pdf Uploaded by: Heather Fletcher Position: UNF

Heather Fletcher 1716 Canal Clipper Court Point of Rocks, MD 21777

March 18, 2025

Dear Honorable Members of the Maryland Senate Education, Energy, and the Environment Committee,

Thank you for your service and dedication during this legislative session. I am writing to express my grave concern over the proposed bill <u>HB0161</u>. If enacted, this legislation would undermine the critical role of parents in making educational decisions for their children and remove the authority of local school boards. As elected officials, you bear a fundamental responsibility to uphold our Constitution and protect the well-being of all Maryland citizens, especially our children. It is essential that your decisions reflect not only the best interests of individuals but also protect the natural and legal rights of parents.

Currently, Maryland Code Regulations 13A.04.18.01 categorize "Gender Identity and Sexual Orientation" under "Family Life and Human Sexuality" and mandate that parents have the right to opt their children out of these lessons. These regulations also specify that direct teaching of family life and human sexuality indicators and objectives will begin in or prior to grade 5.

However, if HB0161 passes, it will create a separate teaching category for "Gender Identity and Sexual Orientation," removing the parental opt-out option for this subject. By eliminating the opt-out, HB0161 undermines the fundamental right of parents to guide their children's moral and educational development. Parents, not the state, are best positioned to determine what content is age-appropriate and aligns with their family's values.

Additionally, the bill would allow the introduction of this material to begin as early as Pre-K, exposing young children to complex and potentially confusing concepts about gender and sexuality at a stage when their understanding is still developing. It is developmentally inappropriate and harmful to engage young children in such complex discussions, and this premature exposure could have unintended negative consequences.

This bill undermines the authority of local Boards of Education and limits voters' ability to influence their local schools. If HB0161 passes, it would force each county board to designate a school health services program coordinator to implement state and local health policies in public schools. This health coordinator would ensure that public schools adhere to local health services guidelines, effectively eliminating local control. It also mandates that local Boards of Education update the Comprehensive Health Education Framework in the manner and at the time the state deems necessary. This top-down approach is unconstitutional and contradicts the principle of government "of the people, for the people, by the people."

I urge you to consider the long-term impacts this bill will have on all Maryland families. I hope you will make a decision that reflects both the best interests of Maryland's children and the rights of parents to determine their children's upbringing. Please vote **UNFAVORABLY** on HB0161!

Thank you for your time and consideration.

Sincerely,

Heather Fletcher Candidate for the Frederick County Board of Education *Authority: Citizens for Heather Fletcher; Treasurer Michael Fletcher*

Phone- (301) 204-0685 Email-fletcherforboe@yahoo.com Website- www.fletcherforboe.com

Background: The <u>Comprehensive Health Education Framework</u> originated from the radical activist groups <u>Advocates for Youth</u>, <u>Answer</u>, and <u>SIECUS</u>: <u>Sex Ed for Social</u> <u>Change</u> in their <u>National Sex Education Standards</u>: <u>Core Content and Skills</u>, <u>K–</u> <u>12</u> document. Advocated for Youth and SIECUS are partners of <u>Planned Parenthood</u> who receives Federal, State, and Local Funding from tax-payer dollars. The second edition of the <u>National Sex Education Standards</u>: <u>Core Content and Skills</u>, <u>K–12</u> has been released and it may be adopted by the Maryland State Board of Education this year. The <u>Johns Hopkins Medicine Emerge Clinic</u> provides puberty blockers and hormones to children 5-years-old and older; if the child has Medicaid, taxpayers will fund these treatments.

HB01611-Unfavorable-Comprehensive Health Education Uploaded by: Jade Chang

HB0161-**Unfavorable**-Primary and Secondary Education - Comprehensive Health Education Framework – Established

This bill takes away parents' rights to raise their children according to the parents' family value, faith, religion and culture. It is cruel and unfair for the whole family.

This bill takes away parents' rights to supervise and influence their children during the children's vulnerable age. It makes it unnecessarily difficult for the parents to be their own children's role model. It is cruel and unfair for the parents.

This bill takes the children away from their parents and family when the children need their guidance, support and love the most. It will damage the children's mental health, create anxieties and frustration. It is cruel and unfair for the children.

HB 161 testimony OPPOSE (WCBOE) 2-26-25.pdf Uploaded by: Jamie Brown







BILL:	House Bill 161
TITLE:	Primary and Secondary Education – Comprehensive Health Education Framework -
	Established
HEARING DATE:	March 20, 2025
POSITION:	OPPOSE
COMMITTEE:	Senate Education, Energy, and Environment Committee
CONTACT:	llissa Ramm, Chief Legal Counsel, 301-766-2946

Washington County Board of Education opposes House Bill 161 that seeks to undermine local control by establishing a state mandated comprehensive health education framework that is duplicative of the already state agency, educator developed framework.

Each year, prior to the Maryland legislative session, Washington County Board of Education adopts a legislative program that sets forth its core values for the upcoming session. As it has done for several years, the Board of Education adopted the core value of local control for the 2025 Maryland legislative session reaffirming its commitment to preserving local autonomy in education policy and ensuring that curriculum decisions are made at the local level. This model best serves students and families while promoting high standards for academic accountability and curriculum tailored to meet the needs of each individual county. Students are best served by having an independent local board of education that is engaged with its superintendent and the school community to discuss and to debate important issues that directly impact the quality of education. The widely recognized success of Maryland schools is a testament to the effectiveness of this governance model which is why the Board of Education opposes any legislation or regulatory initiatives that would have the effect of diminishing local board governance and why it must oppose House Bill 161.

House Bill 161 attempts to legislate curriculum, a responsibility that has always been best developed at the local level using a state department of education approved framework. In fact, House Bill 161 would be duplicative of an already established comprehensive health education framework developed by educators and health experts from across the state for students in prekindergarten through high school that Washington County Board of Education and the other twenty-three school systems use to establish their individual health education curriculums. It is imperative that each local school system remain enabled to develop their own educator developed curriculum, including health education curriculum, which is tailored to meet the needs of their individual county. This flexibility is crucial and should not be eroded by a legislatively established model with no ability to adapt to the needs of students and families.

Furthermore, House Bill 161 attempts to restrict parental rights by altering the existing opt-out provision that is already well established in COMAR (13A.04.18.01) for parents and caregivers to opt their students out of the comprehensive health education instructional program. The Maryland State Department of Education established through COMAR this opt out provision several years ago that gives boards of education local control of the opt out process, honoring parents' preferences in determining what is best for their student's education. House Bill 161 is duplicative and unnecessary, complicating an already effective process.

Washington County Board of Education opposes House Bill 161 and requests the Education, Energy, and Environment Committee to issue an unfavorable report on the basis that it seeks to take away local control from boards of education and is duplicative.

Thank you.

Cc:	Washington County Board of Education Members
	Washington County Delegation to the Maryland General Assembly
	Dr. David T. Sovine, Superintendent
	Dr. Jennifer Webster, Associate Superintendent for Administration and Leadership
	Dr. Gary Willow, Associate Superintendent for Curriculum and Instruction
	Mr. Jeffrey Proulx, Chief Operating Officer
	Ms. Ilissa Ramm, Chief Legal Counsel
	Mr. Brian Dulay, Director of Governmental Relations, Maryland Association of Boards of Education
	Ms. Mary Pat Fannon, Executive Director, Public School Superintendents' Association of Maryland

HB0161.pdf Uploaded by: Joan Yowell Position: UNF

Joan Yowell 10148 Old Frederick Road Ellicott City, MD 21042

Regarding House Bill 0161

I am against this bill. I do not think as a parent that the school should be teaching our children about sex education at preschool, kindergarten or elementary school ages. The parent has the right to teach or not to teach their children about sex. The burden of sex is something children should not have to carry at young ages. Their minds are not developed enough for such a burden. I am against this bill passing. I hope that you will hear my opposition and take it seriously.

Thank you,

Joan Yowell

HB 161 Written Testimony.pdf Uploaded by: Justin Kuk Position: UNF

Dear Education, Energy, and the Environment Committee,

My name is Justin Kuk and I am both a parent of school-aged children and a National Board Certified educator. I am writing to ask you to oppose HB 161 and to stop it in committee.

This bill weakens the local control of school boards to make curricular decisions based on input from parents and community members and is a direct attack on parents' rights to make educational decisions for their children related to complex and controversial topics. The bill requires the Maryland State Department of Education to develop a new state health curriculum framework with eight required domains, including 1) Family Life and Human Sexuality and 2) Gender Identity and Sexual Orientation. The bill also mandates that county school districts adopt a curriculum that aligns with the new health curriculum framework.

MSDE already has a health curriculum framework that includes topics on gender identity and sexual orientation, but these are currently included under the existing Family Life and Human Sexuality framework. There is not a separate Gender Identity and Sexual Orientation domain in the existing health curriculum framework. Under state law, school districts are required to provide families with the opportunity to opt their children out of instruction on topics in the Family Life and Human Sexuality domain. Therefore, parents currently have the right to opt their children out of instruction on topics related to gender identity and sexual orientation. By creating separate domains for 1) Family Life and Human Sexuality and 2) Gender Identity and Sexual Orientation, HB 161 will remove families' right to opt their children out of complex and controversial topics related to gender identity and sexual orientation because school districts will only be required to provide an opt-out alternative for instruction related to the Family Life and Human Sexuality domain. It is obvious that the primary, if not only, goal of this bill is to force controversial ideas and beliefs on all Maryland public school children, starting in pre-kindergarten.

While the bill does still require school districts to provide a parental opt-out option for the Family Life and Sexuality domain, I have concerns about the reliability of communication between schools and parents. This requirement could easily be evaded by a teacher or administrator with an ideological agenda to push. They could claim that the opt-out form was sent home with the student but was somehow lost before it reached the parent. An opt-in requirement would much better protect parental rights.

However, as previously explained, the bill **does not** require school districts to even provide a parental opt-out option for the Gender Identity and Sexual Orientation domain. In fact, state delegates had an opportunity to accept an amendment that would have added this protection for parental rights, but they overwhelmingly denied it by a 92-38 vote. Parents have the right to make educational decisions for their children and should have the right to decide when and how complex and controversial topics such as gender identity should be introduced to their children. The design of this bill shows that it has the clear intent to require all Maryland public school children to receive instruction related to gender identity and sexual orientation and to skirt current state law that protects parental rights by removing those topics from the Family Life and Human Sexuality domain.

Moreover, gender ideology should not even be taught in Maryland's public schools because it is based on controversial ideological beliefs and not scientific facts, which should be the basis of any health curriculum framework. The proposition that a child can self-select their gender is an ideological position that is not based on biology and should not be included in a public school health curriculum.

Marylanders understand that the Democratic Party enjoys a super-majority in both chambers of the state legislature. However, if you support HB 161 you will not be supporting the views demographics that heavily support the Democratic Party. Pew research shows that 68% of Black Americans believe that a person's gender is determined by their biological sex. Even a majority of liberal Black Americans (51%) hold this view. I am willing to bet that if many Democratic senators surveyed their constituents, they would find that they do not favor either the ideas that HB 161 will require to be taught or the attempt to remove families' rights to opt out of instruction on these ideas.

Finally, it is your duty to steward public schools in Maryland. From the 2019-2020 school year to the 2023-2024 school year, enrollment in Maryland Public Schools dropped from 909,414 to 890,137, which is a decrease of 2%. If this bill is passed into law, I believe that even more families will leave public schools in favor of homeschooling or private schools that better fit their values. Not only will this impact school funding but it will cause some of the most active and supportive parents to pull back from their involvement in public schools. This will be a detriment to the overall success of Maryland public schools.

For all the reasons listed in this email, I urge you to oppose HB 161. This is not about silencing voices or banning books. It is about protecting and respecting the role and rights of parents to determine when and how to introduce their children to complex and controversial ideas. Thank you for your consideration.

Sincerely,

Justin Kuk

Baltimore, Maryland

I am in opposition to HB 0161.pdf Uploaded by: Kathleen Barnett Position: UNF

I am in opposition to HB 0161. Parents are the deciders of what their children are exposed to, not the government.

UNFAVORABLE.HB161.MDRTL.L.Bogley.pdf Uploaded by: Laura Bogley



Opposition Statement HB 161 Comprehensive Health Education Framework Laura Bogley, JD Executive Director, Maryland Right to Life

We Strongly Oppose HB 161

On behalf of our 200,000 followers across the state, we strongly object to HB 161. This bill usurps the local authority of county school boards, undermines parental rights to make medical decisions for their children and further subjects minor school children to radical sexuality indoctrination and abortion coercion at the hands of those who stand to gain financially from unplanned pregnancies. We once again ask the state to put the well being and safety of school children, before politics and profit, by issuing an unfavorable report on this bill.

We Trust Parents

Maryland Right to Life trusts parents to make the best decisions about their children's health. State law must recognize the natural and legal right of parents to provide consent for their children's medical care. But the state has repeatedly demonstrated a wanton disregard for the rights of parents and the welfare of school children. Under the influence of the abortion industry, the state removed the requirement that parents must first give permission for their child to participate in the sex ed curriculum, or to "opt in". Parents now have the obligation to "opt out" if they are provided notice at all.

The State of Maryland, through the Department of Education has been entrusted by parents ONLY with the academic instruction of Maryland children. The state has far exceeded its limited authority to act in place of the parents during the school day, particularly in the matter of student health. The state has broadly expanded student health services beyond treating scraped knees and headaches, to now establishing full service community health centers on school property managed by third parties who stand to gain financially from substandard care and in some cases, unplanned pregnancy.

Maryland is State Sponsor of Abortion Industry

Maryland law does not require sex education to be either medically accurate nor age appropriate and it is neither. Both the Department of Education and the Department of Health have become state sponsors of the abortion industry, using taxpayer funds to contract out educational curriculum development, programs and training to questionable third-party organizations that are financially interested in abortion sales, including Planned Parenthood and Advocates for Youth.

Together they have established the existing **Maryland Comprehensive Health Education Framework** and the **Maryland Standards for School-Based Health Centers**. They are pushing a radical sexuality agenda beginning in kindergarten that includes morally bankrupt and medically inaccurate curriculum that is not healthful or appropriate at any age. Already in Maryland a minor girl may undergo a medical procedure to implant birth control, get free transportation to an abortion mill, or receive chemical abortion pills, all during the school day with an excused absence and without parental notice or consent (see attachment). The lack of parental

notification under existing standards, puts students at greater risk of abortion coercion, undiagnosed abortion complications including death, and enables pedophiles and sexual abusers to continue abusing child victims.

Recently, the Maryland General Assembly removed oversight of School Based Health Centers from the Department of Education and gave the Department of Health unilateral control over health education. They broadly expanded what type of providers may manage and operate School Based Health Centers. We are opposed to any policy that allows Planned Parenthood to manage clinics on school grounds as they currently do in Los Angeles, California (see article *Washington Examiner*). The number of abortions increases proportionately to increases in public funding for Planned Parenthood.

This bill seeks to expand all of the above and impose these dangerous policies on all local school boards and county schools.

Maryland is Failing to Protect Children

The Assembly recently removed protections under the law for children by reducing the age of medical consent for behavioral health services to 12 years of age. Mental health, including anxiety or depression has long been used to justify taxpayer funded abortion including on minor girls. Many of the same businesses who commit abortions, are expanding their business models and their reach over defenseless children by pushing puberty blockers and gender mutilation. Some have expressed their intention to use school psychologists and counselors as a feeder system to prey upon school children for their own financial gain.

While Maryland law already permits girls 16 and over to undergo abortion procedures without parental notice or consent, we do not know how many abortions are committed on children under the age of 16. The state shields abortionists by allowing them to commit abortions unfettered and without reporting requirements to the state or the Centers for Disease Control. Maryland is one of only three states that do not require abortion reporting. While abortion providers are supposed to be subject to the law as mandatory reporters of suspected child abuse, we are aware of no such report. Inspections of abortion clinics and practices are complaint-driven only. But even after two women suffered near fatal injuries from botched abortions in Bethesda, the Maryland Department of Health refused to inspect the facility until after legal action was taken by the victims.

Pregnancy is not a Disease

Abortion is not healthcare. It is violence and brutality that ends the lives of unborn children through suction, dismemberment or chemical poisoning. The fact that 85% of OB-GYNs in a representative national survey do not perform abortions on their patients is glaring evidence that abortion is not an essential part of women's healthcare. Women have better options for comprehensive health care. There are 14 federally qualifying health care centers for every Planned Parenthood in Maryland.

No public funding for abortions

Taxpayers should not be forced to fund elective abortions, which make up the vast majority of abortions committed in Maryland. State funding for abortion on demand with taxpayer funds is in direct conflict with the will of the people. A 2023 Marist poll showed that 60% of Americans, both "pro-life" and "pro-choice" oppose the use of tax dollars to pay for a woman's abortion.

Disparate Impact Statement

Abortion in America is Black genocide and must be defunded. Abortion has a disparate impact on Black Americans who have long been targeted by the abortion industry for eugenics purposes. The founder of Planned Parenthood was a known racist and eugenicist who called for the extermination of human beings she deemed "unfit" including Black persons and immigrants. Even today, 78% of Planned Parenthood clinics are located in minority communities. As a result abortion is the leading cause of death of Black Americans, more than gun violence and all other top causes combined. It is estimated that as much as half of all Black children are killed through abortion violence in Maryland. Black Americans who once were the largest minority group in the United States, have now dropped to second behind Latino-Americans.

Love them both

This bill stands in conflict with the fact that 82% of Americans in the 2025 Marist poll favor laws that protect both the lives of women and unborn children. Public funds instead should be prioritized to fund health and family planning services which have the objective of saving the lives of both mother and children, including programs for improving maternal health and birth and delivery outcomes, well baby care, parenting classes, foster care reform and affordable adoption programs.

Funding restrictions are constitutional

The Supreme Court of the United States, in *Dobbs v. Jackson Women's Health* (2022), overturned *Roe v. Wade* (1973) and held that there is no right to abortion found in the Constitution of the United States. As early as 1980 the Supreme Court affirmed in *Harris v. McRae*, that *Roe* had created a limitation on government, not a government funding entitlement. The Court ruled that the government may distinguish between abortion and other procedures in funding decisions -- noting that "*no other procedure involves the purposeful termination of a potential life*", and held that there is "*no limitation on the authority of a State to make a value judgment favoring childbirth over abortion, and to implement that judgment by the allocation of public funds.*"

Once again, we urge you to put parents and children before politics and profit, by issuing an unfavorable report on this bill.

Sincerely,

Laura Bogley, J.D. Executive Director Maryland Right to Life Developmentally appropriate reproductive care must be provided according to community acceptance, documented need and community norms. Reproductive health services are not in lieu of reproductive health services provided by community base health providers, SBHC are encouraged to partner with other community-based providers.

Reproductive Health Services	Level I Core	Level II Expanded	Level III Comprehensive
d. General Reproductive Health Services			
Reproductive health exam (inclusive of pap, pelvic, testicular exam)	Recommended	Recommended	Recommended
Abstinence education	Onsite	Onsite	Onsite
Referral for community based reproductive healthcare services	Onsite	Onsite	Onsite
Case management	Onsite	Onsite	Onsite
Pregnancy testing	Onsite	Onsite	Onsite
Reproductive Health Education	Onsite	Onsite	Onsite
e. Family Planning Services	Level I Core	Level II Expanded	Level III Comprehensive
Family Planning Services		Recommended	Recommended
Prescriptions for contraceptives	Recommended		Recommended
·	Recommended		Recommended
Case management	Onsite	Onsite	Onsite
Referral for community based reproductive healthcare services	Onsite	Onsite	Onsite
Condom availability	Recommended	Recommended	Recommended
Prenatal care	Referral	Referral	Referral
Informing and referring for birth control	Onsite	Onsite	Onsite
Dispensing contraceptives	Onsite or Referral	Onsite or Referral	Onsite or Referral
f. STD/STI Services	Level I Core	Level II Expanded	Level III Comprehensive
Case management	Onsite	Onsite	Onsite
STD/STI treatment and testing	Onsite	Onsite	Onsite
Condom availability	Recommended	Recommended	Recommended
HIV pre- and post-test counseling/HIV testing	Recommended	Recommended	Recommended
HIV/AIDS treatment	Referral	Referral	Referral

Mental Health Services must be provided in collaboration with a licensed provider for those students requiring psychotropic drugs as part of their treatment.

g. Mental Health Services	Level I Core	Level II Expanded	Level III Comprehensive
Individual mental health assessment	Referral	Onsite	Onsite
Mental health treatment	Referral	Onsite	Onsite
Mental health crisis intervention	Referral	Onsite	Onsite
Group therapy	Referral	Onsite	Onsite
Family therapy	Referral	Onsite	Onsite
Consultation with school administrators, parent/guardian, teachers and students	Onsite	Onsite	Onsite
Psychiatric evaluation	Onsite or Referral	Onsite or Referral	Onsite or Referral
Psychiatric medication management	Onsite or Referral	Onsite or Referral	Onsite or Referral

×.

Planned Parenthood plans to infiltrate high schools

by Kate Haldiman, Contributor | December 16, 2019 02.017 PM

Planned Parenthood <u>accounced</u> it will be opening 50 clinics in Los Angeles high schools last week. This is just the organization's latest attempt to infuse its values into the public school system.

Though the new "Wellbeing Centers" stop short of offering surgical abortions, they will provide emergency contraception, STI testing and treatment, and a wide range of birth control options. Funded by a \$10 million grant from Los Angeles County and \$6 million from Planned Parenthood, 50 clinics will open over the next three years, available to more than 75,000 students.

Students can walk into the clinics anytime — including during class. Per California law, minors can receive emergency contraception and other forms of birth control, and healthcare providers are not allowed to inform their parents without the minor's permission.

The clinics will also train hundreds of teens to be "peer advocates" about "safe sex and relationships" and will provide "pregnancy counseling." Pro-life advocates believe these are thinly-veiled efforts to drive more business to Planned Parenthood's abortion-providing clinics.

"If LAUSD truly cares about the health of our daughters (and sons) it would not give unfettered access to our kids to an organization that directly benefits from unplanned pregnancies," 28-year California public school teacher and founder of the nonprofit organization For Kids and Country Rebecca Friedrichs said in a statement.

"District officials are quick to point out these clinics won't technically offer abortions on-premises, but no one is fooled that abortion won't be heavily pushed on our daughters and sons by an organization that has made billions off the macabre practice," she concluded.

This move builds upon <u>the controversial sex education framework</u> California forced into its public schools in April. Planned Parenthood helped draft and lobby for this effort — which pushes schools to teach young children about gender identity and how to perform certain types of sexual acts.

Roughly 200 parents marched on Sacramento against the curriculum before it was enacted, and a petition in Fremont, California, garnered more than 8,000 signatures. The outcry over Planned Parenthood's new in-school clinics could be even louder.

Parents should be alarmed by Planned Parenthood's latest effort to usurp their authority as the primary educators of their children, and the Los Angeles school system's acquiescence. As progressive groups continue to co-opt public schools, parents will increasingly face a decision about whether they must leave the system — or risk the state deciding it knows best for their children.

Kate Hardiman is a contributor to the Washington Examiner's Beltway Confidential blog. She taught high school in Chicago for two years while earning her M.Ed. and is now a J.D. candidate at Georgetown University Law Center. ¥ f in

HB161 UNFAVORABLE Health Education Framework.pdf

Uploaded by: laura wade Position: UNF

RE: HB 161 POSITION: UNFAVORABLE

Dear Members of the Senate Education, Energy, and Environment Committee,

I strongly oppose Maryland House Bill 161, Primary and Secondary Education—Comprehensive Health Education Framework. This legislation, sponsored by Delegates Vanessa Atterbeary and Kris Fair, represents an alarming overreach by the state, eroding parental rights, trampling local authority, and undermining religious freedom.

HB 161 severely limits parents' ability to opt their children out of controversial instruction on gender identity and sexual orientation. By restricting opt-out provisions to only the Family Life and Human Sexuality domain, the bill effectively sidelines families from critical decisions about their children's exposure to sensitive topics. This not only disregards parental authority but also threatens the religious beliefs and values of many public school families.

The bill's apparent intent is to impose divisive ideological concepts on all Maryland public school students, starting as early as pre-kindergarten. Such a mandate overrides the rightful role of parents and local communities in shaping educational content that reflects their values and needs. By centralizing control over health education curricula, HB 161 strips away local autonomy and replaces it with a one-size-fits-all approach dictated by the state.

For these reasons—its assault on parental rights, its disregard for local authority, and its threat to religious freedom—I urge you to oppose HB 161.

Thank you for your time and consideration.

Laura Wade

Street, Maryland

HB0161- State Board- Oppose- Crossover.pdf Uploaded by: Madeline Houck



Carey M. Wright, Ed.D. State Superintendent of Schools Joshua L. Michael, Ph.D. President, State Board of Education

TO: Senate Committee on Education, Energy, and the Environment

BILL: House Bill 0161- Primary and Secondary Education - Comprehensive Health Education Framework – Established

DATE: March 20, 2025

POSITION: Oppose

The Maryland State Department of Education (MSDE) and the State Board of Education respectfully oppose **HB 161** (Primary and Secondary Education - Comprehensive Health Education Framework – Established), which would require the State Board, in consultation with the Maryland Department of Health (MDH), to develop and include specific topics in a Comprehensive Health Education Framework, require local education agencies (LEAs) to develop opt-out policies, guidelines, and procedures for instruction on family life and human sexuality and beginning on or by June 15, 2026, and annually thereafter, and require LEAs to submit a report to MSDE on their actions related to implementing the Comprehensive Health Education Framework.

We do not oppose the bill based on the merits of the proposed subject matter but on the grounds that the legislative requirement would be duplicative of current regulatory requirements and run counter to the process entrusted to the State Board and MSDE.

While MSDE supports the fundamental principles outlined in the bill's requirements and is strident in ensuring that the development of curricular standards and frameworks is conducted through the longstanding collaborative process between the State Board, MSDE, local education agencies, community partners, and, in this instance, MDH.

On January 23, 2024, the State Board and MSDE developed a process to review, revise, and adopt standards and frameworks, including the existing Comprehensive Health Education Framework. In alignment with the national health education standards, the established <u>Comprehensive Health Education Framework</u> includes all eight topics identified in the bill in an age-appropriate, scientifically based, medically accurate, and data-driven way, as required in this bill.

Additionally, existing Code of Maryland Regulations (COMAR) 13A.04.18.01 requires LEAs to establish policies, guidelines, and/or procedures for student opt-out regarding instruction related to family life and human sexuality objectives, which includes gender identity and expression and sexual orientation and identity.

Further, COMAR 13A.04.18.02 requires local superintendents to certify to the State Superintendent of Schools that the instructional programming within grades prekindergarten through 12 meets, at a minimum, the requirements of the comprehensive health education framework.

MSDE, in partnership with a diverse cross-section of Maryland citizens, including parents, teachers, local education agency leaders, and associated content experts, is actively reviewing the state standards and frameworks related to this subject. In this process, MSDE will be certain to include members of the public and our critical partners in the General Assembly.

200 West Baltimore Street Baltimore, MD 21201 | 410-767-0100 Deaf and hard of hearing use Relay.

marylandpublicschools.org



Carey M. Wright, Ed.D. State Superintendent of Schools Joshua L. Michael, Ph.D. President, State Board of Education

We respectfully request that you consider this information as you deliberate **HB 161**. Please contact Akilah Alleyne, Ph.D. <u>akilah.alleyne@maryland.gov</u>, Executive Director of Government Affairs, for any additional information.

Oppose HB 161.pdf Uploaded by: Mark Meyerovich Position: UNF

Oppose HB 161

The bill aims to broadly expand health services in schools. Worse, it simultaneously strives to reduce or eliminate parental knowledge or involvement. The topics in the Framework do not all strictly relate to health, while at the same time may clash with the diversity of cultures and family values. Yet, it gives little control or even information to parents, the actual caregivers of the children being educated.

Parents must be involved whether they agree with the action or not. Parents are the foundational support in healthy families and provide strong support to growing children. School systems that exclude parents on the premise of protecting student privacy as it relates to mental or emotional health are violating parental rights and legal obligations. However, schools are not responsible for any negative consequences of their "frameworks." It would be parents who must deal with any consequences.

Thus, if parents want to opt out of de-facto mental health services provided by schools, they should be able to do so freely. There are multiple cultures, and among them there are strong differences of opinions on the issues of gender expression, sexual orientation and romantic attraction. Every culture, tradition, or family looks differently at such topics and at what age those are appropriate. The traditional values protect children from the chaos and temptations of free and diverse societies. It is the traditional values that grown children and young adults learn to lean on during difficult times. Schools must not subvert those values by forcing some arbitrary framework across the board.

The mandatory topics, along with goals and grading, force a one-size-fits-all approach on some very sensitive subjects. There is no intent to protect children's modesty or innocence. If not taught by parents, these topics should be taught by highly skilled therapists. How will schools find so many qualified instructors for such a comprehensive program? In addition, the topics are heavily influenced by the medical/pharmaceutical industry and predispose children to blind trust in the industry's services and interventions.

I strongly urge you to oppose the bill.

Sincerely, Mark Meyerovich Gaithersburg, MD

Oppose HB0161 No Opt Out on Gender Identity.pdf Uploaded by: Nancy Shih

1/27/2025

I strongly oppose HB0161 that forbids local BOE to grant opt-out to parents on Gender Identity & Sextual Orientation course.

HB0161 is an awful bill! It prohibits parents from opting out of the Gender Identity course. The bill violates parental rights at all levels! What can be more egregious than depriving parents of their rights to protect their own children from the indoctrination of gender ideology!

President Trump already ordered in his Executive Order of Defending Women from Gender Ideology that the United States only recognizes two sexes, male and female (Sec. 2) and that all agencies shall remove and cease issuing statements, policies, regulations, forms and communications that promote gender ideology (Sec 3. (e)).

However, HB0161 forces parents and kids to take Gender Ideology courses. HB0161 strips local BOE of the authority to grant opt-out to parents on Gender Ideology courses. This bill blatantly violates President Trump's EO!

I just want to call your awareness that your defiance against the Federal law may eventually impose costly and punitive consequences upon the State finance and funding. **Gender Ideology must be STOPPED!**

https://twitchy.com/amy-curtis/2025/01/26/trump-teachers-who-suggest-kidsare-trans-will-face-consequences-n2407342

Trump: "Any teacher or official that suggests to a child that they were trapped in the wrong body they will face severe consequences, civil rights violations for sex discrimination and elimination of federal funding "

I urge you to vote unfavorable to HB0161.

Sincerely, Nancy Shih

Howard County

_HB 161 - xover- Comprehensive Health Education Fr Uploaded by: Nia Callender



BILL:	HB 161
TITLE:	Primary and Secondary Education - Comprehensive Health Education Framework - Established
DATE:	March 20, 2025
POSITION:	Unfavorable
COMMITTEE:	Senate Education, Energy and the Environment Committee
CONTACT:	Mary Pat Fannon, Executive Director, PSSAM

The Public School Superintendents' Association of Maryland (PSSAM), on behalf of all twenty-four public school superintendents, **opposes** House Bill 161.

This bill requires the Maryland State Department of Education (MSDE), in consultation with the Maryland Department of Health (MDH), to develop a comprehensive health education framework that includes, at a minimum, specified topics. Each local board of education must create an age-appropriate curriculum that is consistent with the comprehensive health education framework as specified.

Local superintendents strongly support robust and comprehensive instruction in health education, and believe that the legislative intent of this bill is already being met. However, we ask the Committee to continue to honor the well-established and balanced relationship between the state and local education experts on the creation of standards, and implementation of local curriculum.

As indicated in written testimony from MSDE and the State Board last year, they explained that in January of 2024, under the leadership of the new State Superintendent, "the State Board and MSDE developed a process to review, revise, adopt standards and frameworks, including the existing Comprehensive Health Education Framework." The existing Framework continues to include all topics included in this legislation.

Additionally, their testimony points to existing Code of Maryland Regulations (COMAR) 13A.04.18.01 that "requires LEAs to establish policies, guidelines, and/or procedures for student opt-out regarding instruction related to family life and human sexuality objectives, which includes gender identity and expression and sexual orientation and identity. Further, COMAR 13A.04.18.02 requires local superintendents to certify to the State Superintendent of Schools that the instructional programming within grades prekindergarten through 12 meets, at a minimum, the requirements of the comprehensive health education framework."

Again, PSSAM strongly supports the current implementation of the health curriculum consistent with State guidelines. Each Maryland local school system must be afforded flexibility in developing curriculum that best reflects the specific, and diverse needs of their student population and local community.

For these reasons, PSSAM **opposes** House Bill 161 and kindly requests an **unfavorable** committee report.

No on HB161 3_20 Senate EEE Committee.pdf Uploaded by: Rebekah Esko

Honorable Chair and members of the Education, Energy, and the Environment Committee,

My school district, Howard County Public Schools, opposes HB161 and so do educators and parents all over Maryland. Everyone is asking why legislators who are supposed to represent their constituents are supporting this bill that would take away schools' ability to teach health in culturally sensitive ways, take away parents' rights to direct the upbringing of their children, and put federal funding for education at risk.

Whenever the topic of gender identity comes up, certain inaccurate claims are inevitably put forward. I'd like to address some of these:

1. Claim: We must teach young children about gender identity and sexual orientation to prevent bullying.

Reality: The best way to prevent bullying is to teach general principles of kindness. Hyperfocusing on this or that category is actually divisive and can lead to more bullying, not less.

2. Claim: Children "just know" they are trans and that they cannot be talked into believing they are the opposite sex.

Reality: There is no factual basis for that claim whatsoever. In fact there are many cases of individuals who were talked into believing they were trans, either by peers, social media, school, and/or others. When something is held up as special and celebrated, kids are eager to please and trans is no exception. Children have great imaginations and vulnerable individuals are very susceptible to the suggestion that they can forget past trauma and overcome social awkwardness and disabilities by declaring that they are the opposite sex. Adults, well-meaning or otherwise, who push children into this are causing lifelong harm. Not everyone taught about gender ideology at a young age is manipulated into identifying as trans but it is a fact that some of them are manipulated into believing they are trans. Teaching trans ideology at school is an unauthorized, untested psychological experiment. Instead of being forced to teach young children gender ideology, schools should be teaching children that they are not required to fit into strict outdated sex stereotypes. They can have whatever interests they want and wear whatever clothes and hairstyles they want without having to claim to be the opposite sex.

3.Claim: Very few transitioners have regrets:

Reality: We are seeing a flood of detransitioners—individuals who believed they were trans but after a short positive boost in mood, were left with bodies harmed and mental health further damaged. Some regret quite quickly but the most common time for regret is 7-10 years later. We hear people say that "only 1% have regrets" but that is factually false. Any long term data comes from countries where medical transition was very strictly gatekept, weeding out many of the individuals who originally wanted "gender affirming care" That is not at all the situation in Maryland. The 1% number is based on short term studies, convenience sampling that misses most detransitioners, and reports from the original medical providers. Most detransitioners do

not return to their original providers. Even in the cases where they do, there are no medical charge codes for detransitioning and it is not accurately tracked.

4. Claim: "Gender affirming care is life-saving suicide prevention." The popular narrative goes like this: A person with gender dysphoria will commit suicide if they are not socially and medically affirmed at all times.

Reality: When you tell them this you are literally putting suicidal ideation into their heads and training them to think they need to kill themselves. Fortunately, suicides are actually quite rare. In a recent supreme court case, even the ACLU lawyer defending "gender affirming care" admitted that there is no evidence that "gender affirming care" decreases suicides. Preliminary data analysis suggests that suicidality goes up in the long-term, not down, after "gender affirming care."

5. Claim: "Gender Affirming Care" is research-based, well established science.

Reality: WPATH, the most common source of standards of care is unwilling or unable to produce documents explaining how they came to their conclusions and recommendations. There are credible instances of political and industry influence on the standards. To be a part of the committee only required self-nomination, not any type of medical or research credentials or experience. Country after country is walking back their "gender affirming care" after discovering no clear evidence that it actually helps patients. On the other hand, there is clear evidence of lifelong harm to brain development, bone development, the endocrine system, and the reproductive system.

6. Every Major Medical Organization Supports "Gender Affirming Care."

Reality: Doctors have been censored and bullied. Unlike every other medical treatment, doctors are shunned and insulted if they dare bring up risks or concerns about "gender affirming care." So they quietly go along with whatever statements their organizations have declared, fearing the loss of their patients, their licenses, and their jobs. The trans medical industry is a \$5 billion industry. Pharmaceutical companies make donations to politicians, lobbying groups, and political organizations. Pharmaceutical stocks rise as more and more lifelong patients for their products are recruited. How many of these companies are donating to politicians and political parties to push laws like HB161, knowing full well that it will create more patients and profits for them?

Years ago, Senator Lam, one of the bill's original sponsors put it this way, "If the bill doesn't pass, that's fine."

I say to you again, if this bill doesn't pass, that's fine. If it does pass, there will be lawsuits, loss of federal education funds, loss of parental trust in schools, loss of students whose parents won't send them to school because of this, and harm to vulnerable students from being taught sexual topics when they are too young to understand them, without their parents' permission.

Please do the right thing and give an unfavorable report to HB161.

I am in opposition to HB 0161.pdf Uploaded by: Robert Barnett Position: UNF

I am in opposition to HB 0161. Parents are the deciders of what their children are exposed to, not the government.

HB 161 Taylor Unfavorable.pdf Uploaded by: Sallie Taylor Position: UNF

March 18, 2025

The Honorable Brian J. Feldman, Chair The Honorable Cheryl C. Kagan, Vice-Chair And Committee Members of the Education, Energy, and the Environment Committee

2 West Miller Senate Office Building Annapolis, Maryland 21401

> RE: HB 161Primary and Secondary Education - Comprehensive Health Education Framework - Established

Dear Chair Feldman, Vice-Chair Kagan and Committee Members:

I oppose HB 161, Primary and Secondary Education - Comprehensive Health Education Framework – Established because it is not needed.

Highlighting the 2025 bill fiscal note:

"The current health education standards were adopted by the State Board of Education in December 2019; the Maryland Comprehensive Health Education Framework was revised and posted in July 2020. There are Family Life and Human Sexuality standards for prekindergarten through grade 8 and for two semesters of high school. <u>MSDE has previously advised that the current framework contains all the elements required by the bill.</u>"

In addition, this bill seeks to override local control of the health curriculum. Local board members, teachers, parents, and guardians are the best equipped people to determine how these health standards should be applied. Please resist the temptation to apply additional state mandates.

I urge an unfavorable report on HB 161.

Sincerely,

Sallie Taylor

1260 Guilford Road Eldersburg, Maryland 21784

HB 0161 HealthEducFramework SENATE.pdf Uploaded by: SHARON CARRICK

Position: UNF



The Honorable Brian J. Feldman, Chairman and Members of the Education, Energy & the Environment Committee Senate of Maryland Annapolis, Maryland

Dear Chairman Feldman and Members,

RE: **HB0161** – Primary & Secondary Education – Comprehensive Health Education Framework – Established – **OPPOSE**

Whether intentional or not, provisions of the Framework and this bill will have negative implications for the two-parent family as the basic unit of our society.

HB0161 enacts into law the Department of Education's Maryland Comprehensive Health Education Framework: Pre-Kindergarten through 12th Grade. HB0161 goes further by requiring that: "With the assistance of the county health department, each county shall provide (1) adequate school health services; (2) instruction in health education..."

It is apparent that the intent of this bill, the "Blueprint for the Future", and other recently proposed legislation is to dramatically expand health services in the school setting and to substantially reduce or even eliminate parental knowledge and involvement.

The Framework diminishes or eliminates the importance of parents and traditional families --"family is a group of people that support each other." That is an over-simplified and incomplete description of a family, and flagrantly ignores biological and legal relationships. HB 161

We object to implementation of the Framework for these reasons:

• Standard 1a: Mental and Emotional Health

o There is just one mention of "parents" for grades Pre-K through Grade 5 but repeated use of "trusted adults" who can help with emotions or feelings. Parents must be identified as the most important trusted adults, and family beliefs and values respected.



o Parents must be involved whether they agree with the action or not. School systems that exclude parents on the premise of protecting student privacy as it relates to mental or emotional health are violating parental rights and legal obligations. Parents will be left to deal with the consequences, monetary and emotional.

o These elements of the Framework are even more concerning in light of the State's recent change that allows 12-year-olds to seek mental or emotional health counseling and treatment without parental knowledge or consent. This diminishes parental rights and increases the likelihood that school or health personnel can guide a 12-year-old into counseling or treatment without parents' knowledge or consent.

Standard 1b: Substance Abuse Prevention waits until 4th grade to talk about cannabis or illegal drugs, but in Grade 2 introduces the subjects of alcohol, nicotine, and electronic smoking devices. Edible cannabis products are likely to become an increasing danger to children as recreational cannabis is rolled out.

• Standard 1c: Family Life and Human Sexuality

o Kindergarteners will "identify different types of families (e.g., single-parent, same gender, intergenerational, cohabitating, adoptive, foster, etc.)" with no mention of two-parent, heterosexual, or married families.

o Grade 6 -- identify human reproductive systems, including medically accurate names for internal and external genitalia and their functions, and describe conception and its relationship to the menstrual cycle and vaginal sex.

o Grade 7 -- identify solo, vaginal, anal, and oral sex along with possible outcomes for each; and identify ways to prevent pregnancy, including not having sex and effective use of contraceptives, including condoms.

• These are highly sensitive subjects. The Framework makes no mention of protecting the innocence, modesty, or dignity of children in these discussions. How will classes be structured? Who will teach the more sensitive subjects? What are their qualifications?



We are concerned that this intersectionality of education and health services could lead to children being prescribed:

- (1) Contraceptives or abortion pills, or referred for abortions.
- (2) Puberty blockers, cross-sex hormones or gender-affirming surgery before age 18.

It is widely recognized that the human brain is still developing until about age 25, which is why juveniles are not held to the same level of responsibility for serious crimes committed under age 18. For these same reasons, a child under age 18 should not be able to submit to actions that permanently remove their ability to reproduce and become a parent themselves.

For all of these reasons please give **HB0161** an **UNFAVORABLE** report.

Sincerely, Ella Ennis Legislative Chairman Maryland Federation of Republican Women

HB0161 Howard Co BOE Testimony 032025 for EEE - He Uploaded by: Staff Howard County

Position: UNF



Board of Education of Howard County Testimony Submitted to the Maryland Senate, Education, Energy, and the Environment Committee March 20, 2025

HB0161: UNFAVORABLE

Primary and Secondary Education - Comprehensive Health Education Framework – Established

The Board of Education of Howard County (the Board) opposes **HB0161 Primary and** Secondary Education - Comprehensive Health Education Framework – Established as a mandate on local school system curriculum.

HB0161 requires the Maryland State Department of Education, in consultation with the Maryland Department of Health, to develop a comprehensive Health Education framework that included topics currently found in the Maryland Comprehensive Health Education Framework, which was last adopted by the Maryland State Board of Education (MSBE) in June 2021. The bill additionally calls on local boards of education to establish a committee composed of educators, health experts, and members of the local community to review and comment on consistency of local curriculum materials with the comprehensive health education framework. Local boards must also adopt policies, guidelines, and procedures for a parent or guardian to opt out of the Family Life and Human Sexuality unit. A local board could not authorize a parent or guardian to opt a student out of education related to HIV or AIDs prevention. Annually, local boards of education are required to report to MSDE on the actions taken to comply with the requirements of the bill.

While Howard County Public School System (HCPSS) health education staff and the Board support comprehensive instruction in Health Education and the intent of HB0161, and currently follow the Framework adopted by MSBE, preserving local control in the implementation of health curriculum is imperative. Consistent with this practice, MSDE is currently leading a Standards Framework Validation Committee, with the intention of deciding if the current Health Education Framework needs revisions. If the committee decides to open the document for revisions, it will go to public comment for feedback from education stakeholders.

HB0161 is also both redundant of, and contradictory to, current Code of Maryland Regulations (COMAR). Families can opt out of the Family Life and Human Sexuality unit, which has course objectives about HIV and AIDs. There are also course objectives for HIV and AIDs in the Disease Prevention unit, which does not allow for a family to opt out.

As a legislative platform, the Board supports local decision-making in the development of curriculum and policy that account for a balance of educational practices, available resources, public input, and accountability that is informed and guided by State Board established standards and models, rather than legislative mandates. Legislation that limits local board decision-making authority may weaken the Board's bond with the local community and adversely impact the community's participation in the governance and operation of the school system.

For these reasons, we urge an UNFAVORABLE report of HB0161 from this Committee.

10910 Clarksville Pike • Ellicott City, Maryland 21042 • 410-313-7194 • FAX Number 410-313-6833 • boe@hcpss.org

Commented [DL1]: Elementer Viele not sure if the link I sent worked, but if not, hoping this will. I would need to submit today if approved.



Board of Education of Howard County

Jolene Mosley, Chair

Linfeng Chen, Ph.D., Vice Chair

Andrea Chamblee, Esq.

Jennifer Swickard Mallo

Jacky McCoy

Meg Ricks

Antonia Watts

James Obasiolu Student Member

William J. Barnes Superintendent, Secretary/Treasurer

HB161 Opposition Letter.pdf Uploaded by: Susan Edwards Position: UNF

Dear Delegate Atterbeary,

I am writing to express my strong opposition to Bill HB161. This legislation undermines parental rights by limiting their ability to opt their children out of health topics they find objectionable. Parents should have the primary authority to make decisions regarding the sensitive issues their children are exposed to, especially in matters as personal as health education.

Furthermore, the bill's allowance for the teaching of gender identity in public schools without clear parental input or control raises concerns about age-appropriateness and the potential for confusion among young students. Families, not schools, should guide children in these deeply personal matters, based on their own values and beliefs.

I urge you to reconsider HB161 and prioritize parental rights in education.

Sincerely,

Ausan Edwards

2988 Poland Springs Dr Ellicott City, MD 21042 Susanedwards77@gmail.com 301-518-8946

Unfavorable Report for HB 161.pdf Uploaded by: Suzie Scott Position: UNF

* LIBERTY * MARYLAND

Moms for Liberty Maryland Legislative Committee is strongly opposed to HB 0161. This is the third attempt to jam this horrible bill through the legislative process. It is wildly unpopular with parents and local school districts. It is opposed by parents because it usurps parental rights to opt their children out of gender ideology and sexual orientation curriculum. It is opposed by local school boards because it usurps local autonomy.

Gender identity and sexual orientation are exceptionally controversial topics. Many parents question why this is even being included in school curricula. The inability to opt out of this is a step too far. Parents should decide what their kids learn, especially on sex and health matters.

HB 161 centralizes control of education, ignoring community diversity and local decision-making. Our school boards know their students and community best, and this bill undermines that. The bill's requirement for compliance reports suggests heavy oversight, likely increasing administrative burdens and costs. These resources could go to teachers and educational needs instead, especially at a time when educational funding is in a state of chaos.

If parents can opt out of family life and human sexuality, why can't they opt out of gender identity and sexual orientation lessons?

Parents have the fundamental right to oversee the education of their children. This bill is a blatant overreach of parent's rights.

Furthermore, by giving the state the final say on what is taught and whether parents can opt out or not completely ignores local boards of educations' role to approve curriculum that is deemed appropriate for each LEA. This one-size-fits-all approach ignores our state's diversity and local decision-making.

Moms for Liberty Maryland Legislative Committee respectfully requests an unfavorable report for HB 0161. We urge the committee to reject HB 161 to preserve local control and respect parental rights.

Thank you for your consideration.

Written Testimony for HB 161_ Primary and Seconda Uploaded by: Trudy Tibbals

Position: UNF

Written Testimony for HB 161: Primary and Secondary Education - Comprehensive Health Education Framework - Established: Please **VOTE NO** on this legislation!!

Dear Education, Energy & the Environment Committee:

I cannot urge you strongly enough to OPPOSE this bill!!

As a mother, my first and foremost duty is to protect my children. I take this duty very seriously.

I do not agree with the Primary and Secondary Comprehensive Health Education Framework including the topics of Mental and Emotional Health and Gender Identity and Sexual Orientation.

Firstly, as a parent, there are no specifics and to what is included in either topic. Therefore, as a parent, I cannot determine whether my children should participate in these lessons. How could any parent determine that?

Secondly, these topics should be "Opt-in", not "Opt-out". Mental Health is important, but it is not something that should be taught at our Public Schools. Public Schools should be teaching academic subjects that will help our students become college and career ready!! The more we focus on mental health, that's all anyone will ever think about. What about students actually being concerned about learning academics and having them concentrate on that? That is why they attend school, after all. When I attended school in Maryland public schools, no one ever asked any of the students how we felt about everything under the sun. We were supposed to focus on our classes. No one ever asked us any questions about our mental health. So we never concentrated on it!! We concentrated on our classes, and we excelled academically!!

Why are we attempting to put into law subjects that are NOT academic and subjects that many parents will disagree with? Many parents do not believe that Gender Identity and Sexual Orientation and Mental Health should be taught in school and do not want their children exposed to these topics, for a variety of reasons. We should respect the parents' rights and that the parents know their children best, and if the parents do not want these subjects taught to their children, we either should not be teaching these topics, or we should let the parents opt their children out of these topics.

Gender identity and sexual orientation should not be taught in public schools at all. "Gender identity" is an ideology that is currently being debated around the world. Gender dysphoria is a mental illness that is listed in the most recent DSM that psychiatrists use to diagnose mental health illnesses. Would Gender dysphoria be taught as well? Would we teach that many European countries have decided to pull away from the approach that "affirms" a minor's "gender identity" confusion and that those countries have decided that a "wait and see" approach is much better for the minor child instead? Will we also teach that many European countries will not treat gender dysphoria in minors with any medical treatment but with traditional psychotherapy instead? Will we teach that most minors that go through puberty will return to their "gender" at birth? Will we teach that many religions do not believe in gender ideology and that minor children are simply "born in the wrong body"? What will we teach when we realize and accept that too many of our students follow those same religions that do not believe or accept gender ideology? Will we teach these students that their deeply held beliefs are wrong?

There are too many medical and mental health professionals that disagree with gender identity and gender dysphoria to teach it in our public schools. If Gender Identity and Sexual Orientation must be taught at all, these subjects should be **"opt-in" only**, not "opt-out". If mental health is taught, is it being taught by a teacher or a qualified mental health professional that is not employed by the school system, so as to remove any potential biases?

As you can see, there are too many questionable and unanswered variables for a public school system to be teaching these subjects.

Please **VOTE NO** on this bill!! Thank you.

Trudy Tibbals A Very Concerned Mother and Maryland resident

Maryland Legislature HB 0161 Uploaded by: Victoria Harvey

trave

Position: UNF

HB 0161 OPPOSE

Victoria Harvey travelplanner@comcast.net - 443.787.4112 1420 Valbrook Ct. N., Bel Air, MD 21015

HB 0161 OPPOSE

Primary and Secondary Education - Comprehensive Education Framework - Established

Ways & Means Committee Thursday, March 20, 2025 at 1:00pm

Dear Delegates Atterbeary, Wilkins, Feldmark, Eborsole, Fair, Feldmark, Mireku-North, Carr, Patterson, Roberson, Roberts, Vogel, Wells, Wims, Wu, and Young :

My name is Victoria Harvey & I oppose HB 0161. I am asking for an unfavorable vote on HB 0161.

As a democrat I find it repugnant that this bill is doing exactly what republicans accuse our party of - sexualizing children and more centralization of government. This bill also usurps a parents' right to make decisions regarding how and when children are educated about sensitive issues such as gender ideology by eliminating the opt-out.

Children mature at different levels, the final word on these types of controversial subjects should solely be by parents and not the state. This is the third year that this bill is being attempted to shoved down parents throats.

The attempted centralization of state power will render the local board of education impotent. The citizens of each county vote on those that serve on the board, these board members know and understand their local community more than any lawmaker in Annapolis.

To quote Governor Moore "...we don't dictate to the local jurisdictions as to how their educational processes work..." This is exactly what this bill does. This bill will force more students into private & home school.

As a parent I am appalled by this bill. I am once again asking for an unfavorable vote on HB 0161.

Oppose_HB0161.pdf Uploaded by: Yun Xing Position: UNF

Jan 27th, 2025,

Re: oppose Bill HB0161

As a parent of 2 elementary school-age children in Howard county schools, I am writing to express my strong opposition to the Bill HB0161, which forbids local BOE to grant parents to opt their children out of classes gender and sexual orientation classes, even when such content conflicts with their personal values or beliefs. While I fully support fostering an inclusive and respectful environment for all students, I believe this policy undermines fundamental parental rights and does not account for the diversity of family values within our community.

First and foremost, parents play an essential role in guiding their children's education, particularly on sensitive topics such as sexual orientation and personal values. Policies that deny parents the right to make decisions about their child's exposure to these subjects not only infringe on their fundamental rights but also disregard the trust and collaboration necessary between schools and families. Education is most effective when it respects the diverse cultural, religious, and moral perspectives of the families it serves.

Moreover, forcing participation in such classes risks alienating families who feel their deeply held beliefs are being ignored or invalidated. This could erode trust in the educational system and create unnecessary tension between parents and schools. By allowing an opt-out provision, schools can uphold principles of inclusivity while also respecting the plurality of beliefs in our society.

Importantly, respecting parental choice does not detract from the school's ability to provide education on sexual orientation to those who choose to participate. Inclusive education can coexist with policies that honor individual family preferences. Offering alternative activities or assignments for students who opt out ensures that no child feels excluded or penalized while still maintaining the integrity of the curriculum for others.

I urge you to reconsider this policy and incorporate provisions that allow parents to opt their children out of classes addressing sexual orientation when it conflicts with their values or beliefs. Such an approach will demonstrate a commitment to respecting diversity in its fullest sense—not only diversity of identities but also diversity of thought, faith, and culture.

Thank you for your attention to this important matter. I welcome the opportunity to discuss this issue further and collaborate on solutions that support both inclusivity and parental rights.

Sincerely, Yun Xing

yxingckk@gmail.com