Testimony of Julie A.F. Gibbons MD Candidate, Class of 2013 The George Washington University School of Medicine & Health Sciences

Before the DC State Board of Education 23 January 2013

Good evening members of the State Board of Education.

My name is Julie Gibbons, and I am a fourth year medical student at the George Washington University. Through my training at GW I have had the privilege to speak with and provide care to numerous adults, adolescents, and children in the District of Columbia, both in the hospital setting and in several area clinics. I feel that my position as a medical student has allowed me to form important relationships with my patients, in which they share with me intimate details of their lives, and I provide education and the medical care they need.

Having seen firsthand the effects a person's level of health education has on their life, I am here this evening to share my concerns regarding the current high school graduation requirements and proposed changes, with particular concern for the number of Carnegie units required in health education. The addition of one unit to physical education is an excellent addition that will not only improve the health of our youth, but should also help to create the lifelong habit of being physically active. This is of particular importance given the alarmingly high prevalence of obesity in our country. However, an increase in physical education is not enough if we want to best prepare our youth for their futures.

The National Health Education Standards recommends that students receive 80 hours of health education each academic year, which is equivalent to just over 2 Carnegie units over 4 years. The current graduation requirements allot only 0.5 units of health education over 4 years, with no proposal to increase this requirement. Increasing the number of Carnegie units dedicated to health education to be more in line with national standards is imperative to improving and protecting the lives of our youth. When a teen or young adult misses school or work because they are pregnant, have a sexually transmitted infection (STI), have an illness secondary to obesity such as diabetes, or as a consequence of drugs or alcohol, they are missing out on opportunities to learn, prepare themselves for their future, and promote themselves in the workplace.

I have many examples of teens I have met at Children's Hospital and area clinics who show a very obvious lack of health education that has led to one or more health problems. Just a few months ago I was working at a clinic in NE DC, where I met a young female patient who was coming to the clinic because of pain in her lower abdomen. She is a recent high school graduate who was working full time, but thinking about going back to school to earn a business degree. When I asked her if she was sexually active, she said that she had been for the past few months with a new partner. When I asked about birth control, she said that she was not using birth control, because she doesn't like condoms and doesn't want to pay for the "pill." When I asked her if she wanted to become or was trying to become pregnant, she said no. I began to worry about many things that could be causing her abdominal pain, including an STI or pregnancy. When her test results came back a few days later, she was pregnant. We immediately called her with the results, recommending places she could go for obstetric care. This young woman

missed work to come to the clinic because of abdominal pain. I don't know how many days of work she is going to miss in the future secondary to a pregnancy and birth of a child. I also don't know if she will go on to get a degree in business. I sure hope so! This is just one example of a young person who if had been provided with enough class time in health education, may not have found herself in a situation that could potentially have a negative impact on her health and her future.

Along with Metro TeenAIDS, I am recommending that the SBOE increase the health education requirement from 0.5 to 2 Carnegie Units over a 4-year period. This is more in line with many recommendations, including the National Health Education Standards. Many studies show that the more young people are exposed to a particular topic, the more likely they are to learn and apply it. A total of 60 hours of health education in 4 years to cover many important topics in health, is not enough. Our youth deserve a better education so that they can have the skills and knowledge necessary to make healthy decisions, giving them the best chance at their futures.

Thank you for the opportunity to speak today. Please let me know if you have any questions.

The views expressed in this testimony are those of the author and do not necessarily reflect the views the George Washington University School of Medicine and Health Sciences.