HOUSE BILL REPORT HB 2698

As Reported by House Committee On: Health Care & Wellness

Title: An act relating to providing discretion to the department of health with respect to federal funding for the prevention of teen pregnancy under Title V of the federal social security act.

- **Brief Description:** Granting discretion to the department of health with respect to federal funding for the prevention of teen pregnancy.
- **Sponsors:** Representatives Cody, Loomis, Kagi, Walsh, Kirby, Williams, Seaquist, Pedersen, Green, Appleton, Springer, Upthegrove, Hunt, Nelson, Kenney, Schual-Berke, Wood, Hudgins, Santos, Ericks, Ormsby and Rolfes.

Brief History:

Committee Activity:

Health Care & Wellness: 1/23/08, 2/4/08 [DPS].

Brief Summary of Substitute Bill

• Allows, instead of requires, the Department of Health to apply for certain federal funding for abstinence education for adolescents.

HOUSE COMMITTEE ON HEALTH CARE & WELLNESS

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 7 members: Representatives Cody, Chair; Barlow, Green, Moeller, Pedersen, Schual-Berke and Seaquist.

Minority Report: Do not pass. Signed by 6 members: Representatives Morrell, Vice Chair; Hinkle, Ranking Minority Member; Alexander, Assistant Ranking Minority Member; Campbell, Condotta and DeBolt.

Staff: Chris Cordes (786-7103).

Background:

As part of federal welfare reform, adopted in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, \$50 million in funds are made available annually to

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the states to be used exclusively for abstinence education for adolescents. The states request the funding based on a statutory formula related to the number of low-income children in the state. The states must match every \$4 of federal funds with \$3 of state funds. In 2007 43 states received funding, according to the Administration for Children and Families, U.S. Department of Health and Human Services.

Washington welfare reform enacted in response to the federal law includes a statute directing the Department of Health (DOH) to maximize federal funding for abstinence education programs by making timely application for these federal funds. The DOH was also directed to contract with entities qualified to provide abstinence education.

Summary of Substitute Bill:

The requirement related to maximizing federal funding for abstinence education programs is modified. The DOH may, but is not required, to apply for abstinence education funds through Title V Maternal and Child Health block grants made available under the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996.

The requirement for the DOH to seek and accept local matching funds and to contract with entities qualified to provide abstinence education programs is conditioned on receipt of federal funding.

The requirement for the DOH to work to reduce the rate of illegitimate births and abortions is replaced with a goal to reduce the teen pregnancy rate, which should result in a reduced abortion rate.

Substitute Bill Compared to Original Bill:

The substitute bill revises the requirement for the DOH to work to reduce the rate of illegitimate births and abortions and replaces it with a goal to reduce the teen pregnancy rate, which should result in a reduced abortion rate.

Appropriation: None.

Fiscal Note: Not requested.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Staff Summary of Public Testimony:

(In support) It is important that the state continue to deliver HIV/AIDS prevention messages. More than 480,000 teens have been diagnosed with HIV/AIDS in the United States. Lifelong programs give information about staying safe. Abstinence-only programs can hinder that goal because they can have a negative effect on the knowledge that teens acquire. Many homeless youth do not have the information needed to make them safe. Abstinence only does not work for all lifestyles. Teens need to learn responsible sex and how to be protected from sexually transmitted diseases. The state does not need to have Title V funds to provide science-based sex education programs.

(Opposed) None.

Persons Testifying: Ania Beszterda, Lifelong Aids Alliance; Kirsten Harris-Talley, Center for Health Training; and Rosco Siragusa.

Persons Signed In To Testify But Not Testifying: None.