

By: Representatives Clarke, Mayo, Hines, Broomfield, Brown, Burnett, Calhoun, Clark, Coleman (29th), Coleman (65th), Dedeaux, Evans (70th), Flaggs, Fredericks, Gardner, Gibbs, Harrison, Lane, Smith (27th), Straughter, Thomas, Scott

To: Education

COMMITTEE SUBSTITUTE
FOR
HOUSE BILL NO. 999

1 AN ACT TO AMEND SECTION 37-13-171, MISSISSIPPI CODE OF 1972,
2 TO REQUIRE EACH LOCAL SCHOOL BOARD TO ADOPT A SEX-RELATED
3 EDUCATION POLICY TO IMPLEMENT ABSTINENCE-ONLY OR ABSTINENCE-PLUS
4 EDUCATION INTO ITS LOCAL SCHOOL DISTRICT'S CURRICULUM BY JUNE 30,
5 2012, OR TO REQUIRE THE LOCAL SCHOOL BOARD TO ADOPT THE PROGRAM
6 DEVELOPED BY THE MISSISSIPPI DEPARTMENT OF HUMAN SERVICES AND THE
7 DEPARTMENT OF HEALTH; TO REQUIRE THE STATE DEPARTMENT TO APPROVE
8 EACH DISTRICT'S CURRICULUM FOR SEX-RELATED EDUCATION AND ESTABLISH
9 A PROTOCOL TO BE USED BY DISTRICTS TO PROVIDE CONTINUITY IN
10 TEACHING THE APPROVED CURRICULUM; TO PROVIDE THAT INSTRUCTION IN
11 SCHOOL DISTRICTS IMPLEMENTING ABSTINENCE-PLUS EDUCATION INTO THE
12 CURRICULUM MAY BE EXPANDED BEYOND THE INSTRUCTION FOR
13 ABSTINENCE-ONLY EDUCATION WITHIN PARAMETERS APPROVED BY THE
14 DEPARTMENT; TO DEFINE ABSTINENCE-PLUS EDUCATION; TO REMOVE THE
15 AUTHORITY GIVEN TO LOCAL SCHOOL BOARDS TO VOTE IN FAVOR OF
16 TEACHING SEX EDUCATION WITHOUT ANY INSTRUCTION ON ABSTINENCE; TO
17 PROHIBIT ANY TEACHING THAT ABORTION CAN BE USED TO PREVENT THE
18 BIRTH OF A BABY; TO REQUIRE BOYS AND GIRLS TO BE SEPARATED INTO
19 DIFFERENT CLASSES BY GENDER AT ALL TIMES WHEN SEX-RELATED
20 EDUCATION IS DISCUSSED OR TAUGHT; TO REQUIRE THE DEPARTMENT OF
21 HUMAN SERVICES AND THE DEPARTMENT OF HEALTH TO DEVELOP CERTAIN
22 PROGRAMS AND STRATEGIES PROMOTING PREGNANCY PREVENTION AND
23 PROVIDING INFORMATION ON THE CONSEQUENCES OF UNPROTECTED,
24 UNINFORMED AND UNDERAGE SEXUAL ACTIVITY; TO PROVIDE FOR THE REPEAL
25 OF THIS SECTION ON JULY 1, 2016; TO BRING FORWARD SECTION
26 37-13-173, MISSISSIPPI CODE OF 1972, FOR PURPOSES OF POSSIBLE
27 AMENDMENTS; TO AMEND SECTION 2, CHAPTER 507, LAWS OF 2009, TO
28 REVISE THE DUTIES OF THE TEEN PREGNANCY TASK FORCE AND TO EXTEND
29 THE DATE OF THE REPEAL ON THE TASK FORCE TO JULY 1, 2016; TO
30 REQUIRE THE STATE DEPARTMENT OF HEALTH AND THE STATE DEPARTMENT OF
31 EDUCATION, SUBJECT TO THE AVAILABILITY OF FUNDS, TO ESTABLISH A
32 PILOT PROGRAM IN EACH HEALTH CARE DISTRICT, TO BE LOCATED IN A
33 SCHOOL DISTRICT IN A COUNTY HAVING THE HIGHEST NUMBER OF TEEN
34 PREGNANCIES; TO REQUIRE THOSE AGENCIES TO PROVIDE CERTAIN
35 EDUCATIONAL SERVICES THROUGH QUALIFIED PERSONNEL; AND FOR RELATED
36 PURPOSES.

37 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

38 **SECTION 1.** Section 37-13-171, Mississippi Code of 1972, is
39 amended as follows:

40 37-13-171. (1) The local school board of every public
41 school district shall adopt a policy to implement abstinence-only



42 or abstinence-plus education into its curriculum by June 30, 2012,
43 which instruction in those subjects shall be implemented not later
44 than the start of the 2012-2013 school year or the local school
45 board shall adopt the program which has been developed by the
46 Mississippi Department of Human Services and the Mississippi
47 Department of Health. The State Department of Education shall
48 approve each district's curriculum for sex-related education and
49 shall establish a protocol to be used by districts to provide
50 continuity in teaching the approved curriculum in a manner that is
51 age, grade and developmentally appropriate.

52 (2) Abstinence-only education shall remain the state
53 standard for any sex-related education taught in the public
54 schools. However, in any school district in which the local
55 school board chooses the option to implement abstinence-plus
56 education into its curriculum for sex-related education, that
57 instruction may be expanded beyond the instruction given for
58 abstinence-only education within the parameters approved by the
59 department. For purposes of this section, abstinence-only
60 education includes any type of instruction or program which, at an
61 appropriate age and grade:

62 (a) Teaches the social, psychological and health gains
63 to be realized by abstaining from sexual activity, and the likely
64 negative psychological and physical effects of not abstaining;

65 (b) Teaches the harmful consequences to the child, the
66 child's parents and society that bearing children out of wedlock
67 is likely to produce, including the health, educational, financial
68 and other difficulties the child and his or her parents are likely
69 to face, as well as the inappropriateness of the social and
70 economic burden placed on others;

71 (c) Teaches that unwanted sexual advances are
72 irresponsible and teaches how to reject sexual advances and how
73 alcohol and drug use increases vulnerability to sexual advances;



74 (d) Teaches that abstinence from sexual activity before
75 marriage, and fidelity within marriage, is the only certain way to
76 avoid out-of-wedlock pregnancy, sexually-transmitted diseases and
77 related health problems. The instruction or program may include a
78 discussion on contraceptives, but only if that discussion includes
79 a factual presentation of the risks * * * of those contraceptives.
80 In no case shall the instruction or program include any
81 demonstration of how condoms or other contraceptives are applied;

82 (e) Teaches the current state law related to sexual
83 conduct, including forcible rape, statutory rape, paternity
84 establishment, child support and homosexual activity; and

85 (f) Teaches that a mutually faithful, monogamous
86 relationship in the context of marriage is the only appropriate
87 setting for sexual intercourse.

88 (3) A program or instruction on sex-related education need
89 not include every component listed in subsection (2) of this
90 section for abstinence-only education. However, no program or
91 instruction under an abstinence-only curriculum may include
92 anything that contradicts the excluded components. In any school
93 district approving an abstinence-plus curriculum, the scope of
94 instruction may be expanded. For purposes of this section,
95 abstinence-plus education includes every component listed under
96 subsection (2) of this section that is age and grade appropriate,
97 in addition to any other programmatic or instructional component
98 approved by the department, which shall not be limited to
99 instruction and demonstrations on the application and use of
100 condoms or other contraceptives, the nature, causes and effects of
101 sexually transmitted diseases, or the prevention of sexually
102 transmitted diseases, including HIV/AIDS.

103 (4) Any course containing sex-related education offered in
104 the public schools shall include instruction in either
105 abstinence-only or abstinence-plus education. * * *



106 (5) Local school districts, in their discretion, may host
107 programs designed to teach parents how to discuss abstinence with
108 their children.

109 (6) There shall be no effort in either an abstinence-only or
110 an abstinence-plus curriculum to teach that abortion can be used
111 to prevent the birth of a baby.

112 (7) At all times when sex-related education is discussed or
113 taught, boys and girls shall be separated according to gender into
114 different classrooms, sex-related education instruction may not be
115 conducted when boys and girls are in the company of any students
116 of the opposite gender.

117 (8) This section shall stand repealed on July 1, 2016.

118 **SECTION 2.** (1) The Mississippi Department of Human Services
119 shall develop programs to accomplish the purpose of one or more of
120 the following strategies:

121 (a) Promoting effective communication among families
122 about preventing teen pregnancy, particularly communication among
123 parents or guardians and their children;

124 (b) Educating community members about the consequences
125 of unprotected, uninformed and under age sexual activity and teen
126 pregnancy;

127 (c) Encouraging young people to postpone sexual
128 activity and prepare for a healthy, successful adulthood,
129 including teaching them skills to avoid making or receiving
130 unwanted verbal, physical, and sexual advances;

131 (d) Providing medically accurate information about the
132 health benefits and side effects of all contraceptives and barrier
133 methods as a means to prevent pregnancy and reduce the risk of
134 contracting sexually transmitted infections, including HIV/AIDS;
135 or

136 (e) Providing educational information, including
137 medically accurate information about the health benefits and side
138 effects of all contraceptives and barrier methods, for young



139 people in those communities who are already sexually active or are
140 at risk of becoming sexually active and inform young people in
141 those communities about the responsibilities and consequences of
142 being a parent, and how early pregnancy and parenthood can
143 interfere with educational and other goals.

144 (2) The State Department of Health shall develop programs
145 with the following strategies:

146 (a) To carry out activities, including counseling, to
147 prevent unintended pregnancy and sexually transmitted infections,
148 including HIV/AIDS, among teens;

149 (b) To provide necessary social and cultural support
150 services regarding teen pregnancy;

151 (c) To provide health and educational services related
152 to the prevention of unintended pregnancy and sexually transmitted
153 infections, including HIV/AIDS, among teens;

154 (d) To promote better health and educational outcomes
155 among pregnant teens; and

156 (e) To provide training for individuals who plan to
157 work in school-based support programs regarding the prevention of
158 unintended pregnancy and sexually transmitted infections,
159 including HIV/AIDS, among teens.

160 (3) It shall be the responsibility of school nurses employed
161 by local school districts implementing the program developed by
162 the State Department of Health under subsection (2) of this
163 section to carry out the functions of those strategies to promote
164 consistency in the administration of the program.

165 **SECTION 3.** Section 37-13-173, Mississippi Code of 1972, is
166 brought forward as follows:

167 37-13-173. Each school providing instruction or any other
168 presentation on human sexuality in the classroom, assembly or
169 other official setting shall be required to provide no less than
170 one (1) week's written notice thereof to the parents of children
171 in such programs of instruction. The written notice must inform



172 the parents of their right to request the exclusion of their child
173 from such instruction or presentation. The notice also must
174 inform the parents of the right, and the appropriate process, to
175 review the curriculum and all materials to be used in the lesson
176 or presentation. Upon the request of any parent, the school shall
177 excuse the parent's child from such instruction or presentation,
178 without detriment to the student.

179 **SECTION 4.** Section 2, Chapter 507, Laws of 2009, is amended
180 as follows:

181 Section 2. (1) There is created the Teen Pregnancy
182 Monitoring Task Force to study and make recommendation to the
183 Legislature on the implementation of sex-related educational
184 courses through abstinence-only or abstinence-plus education into
185 the curriculum of local school districts and the coordination of
186 services by certain state agencies to reduce teen pregnancy and
187 provide prenatal and postnatal training to expectant teen parents
188 in Mississippi. The task force shall make an annual report of its
189 findings and recommendations to the Legislature beginning with the
190 2012 Regular Session.

191 (2) The task force shall be composed of the following
192 sixteen (16) members:

193 (a) The Chairmen of the Senate and House Public Health
194 and Welfare Committees, or their designees;

195 (b) The Chairmen of the Senate and House Education
196 Committees, or their designees;

197 (c) The Chairman of the House Select Committee on
198 Poverty;

199 (d) One (1) member of the Senate appointed by the
200 Lieutenant Governor;

201 (e) The Executive Director of the Department of Human
202 Services, or his or her designee;

203 (f) The State Health Officer, or his or her designee;



204 (g) The State Superintendent of Public Education, or
205 his or her designee;

206 (h) The Executive Director of the Division of Medicaid,
207 or his or her designee;

208 (i) The Executive Director of the State Department of
209 Mental Health, or his or her designee;

210 (j) The Vice Chancellor for Health Affairs and Dean of
211 the University of Mississippi Medical Center School of Medicine,
212 or his or her designee;

213 (k) Two (2) representatives of the private health or
214 social services sector appointed by the Governor;

215 (l) One (1) representative of the private health or
216 social services sector appointed by the Lieutenant Governor; and

217 (m) One (1) representative of the private health or
218 social services sector appointed by the Speaker of the House of
219 Representatives.

220 (3) Appointments shall be made within thirty (30) days after
221 the effective date of this act, and, within fifteen (15) days
222 thereafter on a day to be designated jointly by the Speaker of the
223 House and the Lieutenant Governor, the task force shall meet and
224 organize by selecting from its membership a chairman and a vice
225 chairman. The vice chairman shall also serve as secretary and
226 shall be responsible for keeping all records of the task force. A
227 majority of the members of the task force shall constitute a
228 quorum. In the selection of its officers and the adoption of
229 rules, resolutions and reports, an affirmative vote of a majority
230 of the task force shall be required. All members shall be
231 notified in writing of all meetings, the notices to be mailed at
232 least fifteen (15) days before the date on which a meeting is to
233 be held. If a vacancy occurs on the task force, the vacancy shall
234 be filled in the manner that the original appointment was made.

235 (4) Members of the task force who are not legislators, state
236 officials or state employees shall be compensated at the per diem



237 rate authorized by Section 25-3-69 and shall be reimbursed in
238 accordance with Section 25-3-41 for mileage and actual expenses
239 incurred in the performance of their duties. Legislative members
240 of the task force shall be paid from the contingent expense funds
241 of their respective houses in the same manner as provided for
242 committee meetings when the Legislature is not in session.
243 However, no per diem or expense for attending meetings of the task
244 force may be paid to legislative members of the task force while
245 the Legislature is in session. No task force member may incur per
246 diem, travel or other expenses unless previously authorized by
247 vote, at a meeting of the task force, which action shall be
248 recorded in the official minutes of the meeting. Nonlegislative
249 members shall be paid from any funds made available to the task
250 force for that purpose.

251 (5) The task force shall use clerical and legal staff
252 already employed by the Legislature and any other staff assistance
253 made available to it by the Department of Health, the Mississippi
254 Department of Human Services, the Department of Mental Health, the
255 State Department of Education and the Division of Medicaid. To
256 effectuate the purposes of this section, any department, division,
257 board, bureau, commission or agency of the state or of any
258 political subdivision thereof shall, at the request of the
259 chairman of the task force, provide to the task force such
260 facilities, assistance and data as will enable the task force
261 properly to carry out its duties.

262 (6) In order to carry out the functions and responsibilities
263 necessary to study and make recommendations to the Legislature,
264 the Teen Pregnancy Monitoring Task Force shall:

265 (a) Form task force subgroups based on specific areas
266 of expertise;

267 (b) Review and consider coordinated services and plans
268 and related studies done by or through existing state agencies and
269 advisory, policy or research organizations to reduce teen



270 pregnancy and provide the necessary prenatal and postnatal
271 training to expectant teen parents;

272 (c) Review and consider statewide and regional planning
273 initiatives related to teen pregnancy;

274 (d) Consider efforts of stakeholder groups to comply
275 with federal requirements for coordinated planning and service
276 delivery; * * *

277 (e) Evaluate the implementation of sex-related
278 educational courses through abstinence-only or abstinence-plus
279 education in local school districts throughout the state;

280 (f) Evaluate the effect of the adoption of a required
281 sex education policy on teen pregnancy rates and dropout rates due
282 to teen pregnancy on the local school district and statewide
283 levels;

284 (g) Compare and analyze data in districts adopting and
285 implementing abstinence-only education to districts adopting
286 abstinence-plus education;

287 (h) Require the Department of Health, the Mississippi
288 Department of Human Services, the Department of Mental Health, the
289 State Department of Education and the Division of Medicaid to
290 conduct a study of community programs available throughout the
291 state, and the areas wherein they are located, which provide
292 programs of instruction on sexual behavior and assistance to teen
293 parents; and

294 (i) Work through the Department of Health, the
295 Mississippi Department of Human Services, the Department of Mental
296 Health, the State Department of Education and the Division of
297 Medicaid to cause any studies, assessments and analyses to be
298 conducted as may be deemed necessary by the task force.

299 (7) This section shall stand repealed on July 1, 2016.

300 **SECTION 5.** (1) Beginning with the 2012-2013 school year, to
301 the extent that federal or state funds are available and
302 appropriated by the Legislature for the purposes of establishing



303 and implementing the Prevention of Teen Pregnancy Pilot Program
304 authorized by Section 41-79-5, the State Department of Health in
305 conjunction with the State Department of Education shall establish
306 a pilot program in each of the nine (9) Health Districts as
307 defined by the State Department of Health, to be located in a
308 school district in a county in that district having the highest
309 number of teen pregnancies.

310 (2) The State Department of Health and the State Department
311 of Education shall jointly provide education services through
312 qualified personnel to increase awareness of the health, social
313 and economic risks associated with teen pregnancy. The services
314 and curriculum provided shall have a primary emphasis on reducing
315 the teenage pregnancy rate in those pilot districts.

316 **SECTION 6.** This act shall take effect and be in force from
317 and after July 1, 2011.

