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Statement to the Boston School Committee re: Proposed Health and Wellness Plan, June 6, 2013

On behalf of the leadership of the Boston Alliance for Community Health, I am writing to urge the School Committee to adopt the Health and Wellness plan. We strongly support the intention of making condoms available to BPS high school students. We support the Health Services section of the policy given the most recent revision: "Condoms will be accessible from community health service partners, the Boston Public Health Commission (BPHC) or, when neither community health service partners nor BPHC staff are available, from appropriate school staff." We enthusiastically support these partnerships, AND we strongly believe that every high school must also have a BPS employee (for example, school nurses) to make condoms available every day throughout the school day in order to ensure true equity and access for all high school students throughout BPS.

I have been working to make condoms available for students since the beginning of the epidemic in the 1980's. Here is why:

- Innumerable studies from around the world have shown the effectiveness of consistent use of condoms in preventing the spread of HIV and other sexually transmitted infections.
- Adolescents do not always plan ahead and are often very spontaneous.
- If the accessibility to condoms is limited to going only through Boston Public Health Commission staff or community partners, this will severely limit the effectiveness of the policy because such personnel are not consistently and readily available in all school settings.
 - Availability of condoms does not increase sexual activity.

Given that the large majority of BPS students are of color, and the HIV epidemic disproportionately affects people or color and there has been a rise in the HIV infection rate among LGBTQ youth of color, this policy change is an essential part of reducing that health inequity.

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A "mantra" of modern public health practice is: "Make the healthy choice the easy choice." Putting any impediments to access to condoms is contrary to this. Our students have many very difficult decisions to make in their daily lives. Making the consistent use of condoms the easy choice is simply good public health practice and that is what this policy should be based on.

With that one change, we enthusiastically support the proposed Wellness Policy including the Comprehensive Health Education section of the policy, and, in particular: "comprehensive sexual health education that is LGBTQ inclusive." In addition, we fully support the Safe and Supportive Schools section of the policy, in particular: "safe inclusive climates for LGBTQ students."

On a personal note, it is very encouraging that over thirty years into the HIV epidemic, the Boston Public Schools are taking the initiative to make a serious contribution to ending the epidemic. If not now, when?

Thank you to the Wellness Council, the Superintendent, and the Executive Committee for working to make an effective policy that can fully support the health and safety of Boston's students.

Sincerely,

David Aronstein, MSW, Director