

To ensure that Minnesota policies regarding adolescent pregnancy, prevention and parenting are evidence-based, MOAPPP advocated for and monitored the following issues in 2009.

Responsible Family Life and Sexuality Education ([HF2986/SF2645](#) – Hornstein/Pappas) **A Coalition for Responsible Sex Ed Initiative** – a bill to require and establish standards for sexuality education in Minnesota public schools for grades 6-12. Responsible Sex Ed advanced this year through hearings in the House K-12 Education Policy and Oversight Committee, House Health Care and Human Services Policy and Oversight, and Senate Health, Housing and Senate Family Security Committee. The bill was referred to the House Floor and Senate Education Committee where no action was taken.

Family Planning and General Prevention ([HF1/SF1](#) - Carlson/Cohen) **A Reproductive Health Alliance (RHA) Initiative** - Family Planning Special Projects (FPSP), grants to fund family planning for low-income Minnesotans in existence since 1978, were fully funded as part of the special session budget agreement reached with the Governor.

Minors' Access to Confidential Services – A Coalition for Responsible Sex Ed Initiative – attempts to erode the minors' consent statute 144.341.347, which ensures confidential access to sexual, chemical and mental health services for adolescents, were unsuccessful.

Child Care ([HF2760/SF2505](#) - Slawik/Bonoff) - The Omnibus Early Childhood bill included a recommendation from the Child Care Simplification Task Force to authorize Child Care Assistance Program (CCAP) for adolescent parents in school for the entire school year. Previous authorization had occurred in 6-month increments.

Pregnant Women Mandatory Reporting Requirements ([HF3059/SF2695](#) – Ruud/Sheran) **An initiative of the City of Minneapolis** – a bill modifying mandatory reporting requirements relating to pregnant women's use of cannabis and alcoholic beverages. This bill passed the House and Senate and was signed into law by the Governor. It is intended to reduce barriers to accessing early prenatal care.

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