

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS' MEETING
PUBLIC COMMENT SIGN-UP SHEET**

Please complete this form and return to the Board Clerk
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MEETING DATE: 3/29/16

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Asian Pacific American Network of Oregon

CONTACT INFORMATION (optional):

ADDRESS: 2788 SE 82nd Ave, Suite 203

CITY/STATE/ZIP: Portland, OR. 97266

PHONE: _____ E-MAIL: _____

IF YOU WISH TO ADDRESS THE BOARD IN PERSON:

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2. Comment for Non-Agenda Items will be called immediately after the vote on the Consent Agenda.
3. Comment for Agenda items will be called during that item's presentation, before the vote is taken.
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ASIAN PACIFIC AMERICAN NETWORK OF OREGON

Chair Kafoury and Multnomah County Commissioners:

The Asian Pacific American Network of Oregon (APANO) is Oregon's oldest and largest Asian and Pacific Islander grassroots advocacy organization. We leverage the collective strength of our 7,000 statewide members to advance equity through empowering, organizing and advocating with our communities. Our office is located in outer SE Portland in District 3, and though we are a statewide organization, many of our members are constituents of yours.

Three years ago, we joined the coalition We Are BRAVE (Building Reproductive Autonomy and Voices of Equity) and adopted an organizational framework affirming the rights, recognition and resources all our families need to thrive—which includes access to the full range of reproductive health options a person might need throughout life, for all people, no matter who they are, where they live or how much money they make. This was an important step for APANO, because we see how lack of access to affordable, consistent and culturally competent care impacts far too many in our communities. In particular, we recognize that:

- **Inequities in access to health care lead to inequitable outcomes.** These include the disparities that Multnomah County's health equity work has highlighted, such as high rates of Pacific Islander mothers with no access to prenatal care in the first trimester and beyond and a high proportion of low birth weight babies born to the Multnomah County Pacific Islander community.
- **For our communities to access the reproductive health care they need, we must also combat a culture of stigma and shame.** Because of the fear, shame and stigma that surround sexual and reproductive health topics, they may go undiscussed or unaddressed. This can lead to a lack of information or support, late or no treatment for real reproductive health concerns, and increased isolation for those who do access care such as treatment for sexually transmitted infections or abortion.
- **Stereotypes about our communities have been used to pass harmful anti-choice policies.** Seven states have now passed sex-selective abortion bans, requiring providers to surveil their patients and legally deny access to abortion services if they believe the person is seeking an abortion due to the sex of the fetus. These bans have passed because lawmakers stereotype Asian communities as likely to seek abortions due to male child preference, spreading the falsehood that sex-selective abortion is pervasive in our communities, when there is no evidence that this is so. This legislation was introduced in 2013, 2014, 2015 and 2016 in Oregon, and will likely be introduced again in further attempts to exclude our communities from access to critical reproductive care.

Thank you for your continued support for the full range of reproductive health care accessible for all. Your ongoing partnership with the BRAVE coalition will help advance health equity for all Multnomah County residents and ensure all our communities can thrive.

Sincerely,

Rev. Joseph Santos-Lyons
Executive Director

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FOR: x AGAINST: _____

NAME: Western States Center

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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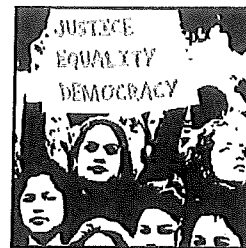
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March 29th, 2016

TO: Multnomah County Commissioners

FM: Amy Casso, Gender Justice Program Director, Western States Center

RE: Support for Reproductive Justice Resolution



Dear Multnomah County Commissioners,

It is my pleasure to express support for this briefing and your future work on a reproductive justice resolution in Multnomah County. I believe that such precedence will open the door to meaningful opportunities and policy. In spring of 2013, a community scan was conducted with 41 leaders from communities of color, representing 34 social justice organizations in Oregon. The findings concluded that leaders overwhelmingly expressed pro-choice, pro-reproductive justice values but had never been asked to take a public position for reproductive rights. Over the last couple of years, we have worked alongside organizations led by communities of color to build public champions for reproductive justice, strengthen reproductive justice advocacy, and foster strong alliances across communities and issue areas. This capacity building project is **We are BRAVE (Building Reproductive Autonomy and Voices for Equity)**, a project of Western States Center. Western States Center is a 25-year-old organization whose mission is to connect and build the power of community organizations to challenge and transform systems to achieve racial, gender, and economic justice.

Today we join with our BRAVE leaders in solidarity and support of this briefing.

We must affirm that all people should have the social, political, and economic power and resources to make healthy decision over their own bodies, sexuality, gender, and families. And we must create the conditions in Multnomah County -- and throughout Oregon -- for all women to have the ability to make healthy decisions based on the full range of reproductive health care options.

More importantly, we must elevate vulnerable populations for whom these options aren't even a possibility; this includes transgender folks, undocumented folks, low-income families, and people of color. Such gaps in services are only harming the wellbeing of our communities as research shows:

- People unable to access an abortion due to a lack of finances are three times more likely to live in poverty within two years of birth.
- Latinas are twice as likely to be uninsured compared to White women, and immigrant Latinas are four times more likely to be uninsured.
- Immigrant women need health coverage, not manufactured policy barriers that continue to bar millions of immigrant women and their families from affordable coverage and care; in 2014, all immigrant women who were not U.S. citizens were three times more likely to be uninsured.
- Roughly 20% of transgender or gender non-conforming people reported being refused medical care.
- Native communities in Oregon and across the country face a health care delivery system that is intertwined with federal funding restrictions such as the Hyde Amendment, which bans use of federal funds for abortion care, leaving them few options: pay out-of-pocket or be income-eligible to qualify for the Oregon Health Plan.

As a Latina Oregonian, and the Gender Justice Program Director at Western States Center, I recognize the transformative value that proactive efforts will have on shifting culture under the current climate so that the issues, shame, and stigma that I and many of my family and community members have been faced with will be less present for the next generation. We stand at a crossroads today, where the most significant reproductive rights court case in 36 years (Whole Woman's Health v. Hellerstedt) is before the U. S. Supreme Court. The implications for communities of color involving this case are clear: it will shape when, how, and where individuals like me may start a family and challenges our autonomy to make health-related decisions over our very own reproductive health care. Let's work together to challenge the institutional and structural barriers that produce poverty, isolation, injustice, and violence.

Thank you for making space for us to tell our stories and share the important and powerful work of We Are BRAVE and Western States Center. Please continue to partner with our leaders working to move forward a resolution lifting up the needs our communities have and affirming the importance of the full-range of reproductive healthcare for all people who live in Multnomah County.

Thank you for your time and consideration.

Respectfully,

Amy Casso

Gender Justice Program Director

Western States Center

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FOR: x AGAINST: _____

NAME: Oregon Latino Health Coalition

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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240 N Broadway Suite 115
Portland OR, 97007

March 25, 2016

Dear Chair Kafoury and Members of the Multnomah County Commission,

Thank you for the opportunity to participate and express our support for access to a full range of reproductive health care in Multnomah County. The Oregon Latino Health Coalition is a state-wide health advocacy organization that focuses on eliminating Latino health disparities through advocacy, development of policy and education. We believe that reproductive health care is essential for all residents in Multnomah County.

Although, our state and county have made significant progress in expanding health care access-- reproductive health care options are still out of reach for many due to lack of affordability, categorical exclusions to coverage, stigma or shame. With limited access to health care, it is less likely that information, and services will reach an uninsured Oregonian. Latinos are least likely of any racial or ethnic group to have health insurance. Timely and affordable health care is a driver to ending health inequities.

We look forward to working with the Multnomah County Health Department, BRAVE and other stakeholders to address reproductive health disparities. Thank you for your time and commitment to exploring solutions and investments towards equitable and full range reproductive health care services for all people in Multnomah County.

Sincerely,

Alberto Moreno
Executive Director

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FOR: x AGAINST: _____

NAME: Momentum Alliance / Rebecca Shine

CONTACT INFORMATION (optional):

ADDRESS: 700 N. Killingsworth Ct.

CITY/STATE/ZIP: Portland, OR 97217

PHONE: _____ E-MAIL: _____

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Dear Multnomah County Board of Commissioners:

Momentum Alliance (MA) is a youth-led social justice nonprofit whose mission is to inspire young people, ages 14 - 30, to realize their power individually and collectively and to mentor future social justice leaders. Momentum Alliance emerged out of the "Papers" Youth Crew, Portland youth who helped produce and distribute the documentary film: "Papers: Stories of Undocumented Youth". MA is located in North Portland, near Jefferson High School. MA works with youth in Multnomah, Washington, Clackamas, and Clark County.

Three years ago, Momentum Alliance joined the emerging coalition We Are BRAVE (Building Reproductive Autonomy and Voices for Equity), which built our capacity and leadership to take a public stance on reproductive justice and helped launch our first Reproductive Justice Summer Camp in summer 2014. Since then, we have been able to launch our Reproductive Justice Youth Advocates program, a year-round paid leadership program for a diverse group of young people from underrepresented communities to come together to explore topics on gender, sexuality, sexual health, and social justice.

MA is submitting this testimony in support of the County's work with BRAVE to further affirm everyone's rightful access to affordable, meaningful, identity-specific, and culturally responsive reproductive health services. As an organization that is actively working to improve the state of reproductive health in Portland, we believe that this briefing and the potential future passing of a resolution will be a monumental step towards expanding access for all communities.

As an organization that is rooted in Portland's youth of color, low-income youth, young parents, LBTQIA youth, undocumented and immigrant youth, youth with disabilities and other underrepresented youth, we have experienced countless barriers to accessing reproductive health in Multnomah County. We have seen the high cost of contraception—ranging from birth control to IUDs—stand as a tremendous barrier to low and middle income youth. We have seen how undocumented youth have no real access to affordable sexual health services. We have seen how teen parents are not accommodated and supported in the school system. We have seen how sexual education in public schools excludes the experiences and needs of LBTQIA youth. We have seen how sexual education in schools demands that young people don't get pregnant and that young people don't get STIs, but does not provide real resources for young people who do get pregnant or are exposed to STIs. We have seen how our school system and health services are unaware of the experiences and needs of trans youth.

Too many of our youth are excluded from meaningful and affordable access to sexual health services and to sexual education that reflects their experiences and needs. We have a long way to go to ensure that undocumented youth, LGBTQ youth, youth of color, ESL & ELL youth have access to sexual health services and sexual education that serve their needs.

We believe that the County can help lead the way in removing barriers to and expanding access to sexual health services, and affirm that all communities should have affordable and meaningful access to reproductive health services. Thank you so much for your time and consideration. We look forward to seeing your leadership on expanding access to reproductive health in Multnomah County.

Sincerely,

Rebecca Shine
Co-Executive Director
Momentum Alliance

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MEETING DATE: 3/29/10

AGENDA ITEM # B.1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Network for Reproductive Options / Katherine McGunness

CONTACT INFORMATION (optional):

ADDRESS: 5439 SE Tolman St.

CITY/STATE/ZIP: Portland, OR 97206

PHONE: _____ E-MAIL: _____

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Katherine McGuinness, MPH, MSW
Board President, Network for Reproductive Options
5439 SE Tolman St
Portland OR
97206

Chair Kafoury and esteemed members of the Commission,

My name is Katherine McGuinness. I live in Southeast Portland, and I am the President of the Network for Reproductive Options, Oregon's abortion fund. The Network for Reproductive Options takes calls from people all over the state who are trying to access abortion services. We believe that people are experts in their own lives, and we work to support people's choices about what is best for themselves, their families and their communities.

On our hotline, we hear from Multnomah County residents every day who face multiple barriers to abortions they want or need, with financial barriers being the most common. The lowest cost of an abortion in Multnomah County is \$550, and can go as high as \$4,000. Having to come up with that kind of money, which is most often due at time of service, when time is of the essence, is hard for some people, impossible for most. Sometimes people can't afford their abortion because they have a private or federally funded insurance plan that won't cover the cost of abortions. Even if their insurance will cover it, sometimes their unmet deductibles are higher than the cost of the abortion itself. We also hear from people who cannot afford insurance, or who are ineligible to purchase it. The people we talk to are often at the intersections—we disproportionately hear from women who are poor, people of color, immigrants, people who have survived physical and sexual abuse, and people who are on the verge of homelessness.

Recently, I spoke to a woman named Edith who called our hotline. She is 37, a mother of three children, the youngest of whom is 6 months old. Edith recently left an unhealthy relationship and relocated to Portland, draining her savings and maxing out her credit cards in order to do so. She was very lucky, and was able to find a job and secure housing. She found out she was pregnant, and knew an abortion was the right choice for her in this instance. This was the first job she had ever had that provided insurance to her, but she was devastated when she found out that no insurance plans provided by her insurance company cover the cost of abortions. We were able to help her with some funding and helped her figure out how to get the rest of the money, figuring out which bills she could put off paying until next month, dealing with late fees and penalties later.

Addressing affordable and accessible reproductive health care at the County level is an important first step towards supporting self determination for all families, including ones like Edith's, here in Multnomah County. We ask that you continue this work by passing a resolution to create a high standard of care, and stand with people making the best health care choices for themselves.

Thank you for the opportunity to testify today.

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AGENDA ITEM # R1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: NARAL Pro-Choice Oregon

CONTACT INFORMATION (*optional*):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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NARAL Pro-Choice Oregon

Good Afternoon Chair Kafoury and Commissioners,

Thank you for the opportunity to provide testimony in support of passing a countywide resolution to increase attention to the accessibility and affordability of reproductive health services, while putting a stop to efforts that limit services or criminalize pregnant and parenting people. Today's briefing, and a future resolution, are steps toward ensuring that every person who lives in Multnomah County can access the reproductive health services they deserve, while taking a reproductive justice approach to improving health and wellbeing.

NARAL Pro-Choice Oregon is dedicated to increasing access to comprehensive reproductive health care for all women and people of childbearing age and ability, including vulnerable and underserved communities. We believe that all people should have the power and resources to make healthy decisions for themselves and their families so they can thrive in all aspects of their lives. We are dedicated to the fight for women, children and all people of childbearing age. We are committed to the growth of families' economic, social and political power, and to making sure all people have the resources to make healthy and informed decisions about their bodies, sexuality and reproduction.

We trust women to make important health care decisions for themselves and their families without ideological interference from others, including insurance companies, their bosses, or elected representatives. While Oregon has the least restrictive abortion laws in the country, we still face barriers receiving timely and affordable care. Over 14,400 Multnomah County residents are affected by federal restrictions on abortion, including federal employees, veterans and those who are covered through Indian Health Service. People struggling to make ends meet should not have to make decisions about their reproductive health based on how they are insured, where they live, or how much money they make —this decision should be based on what is best for them and their families' circumstances.

For this to be a reality in Multnomah County, *all people* need to have access to comprehensive, and culturally responsive, reproductive health care services. We know that stigma and discrimination continue to impact the health care our communities receive. When people face barriers to receiving culturally responsive and comprehensive reproductive health services, it not only interferes with their ability to make personal decisions, but it amplifies existing health disparities. This disproportionately harms people who already face the greatest health inequities and barriers to accessing health care, including lower-income women, young women, women of color, and transgender women and men.

Reproductive justice is about more than a legal right to choose. It looks at the intersections that impact, affect, and shape choice—factors like race, class, socio-economic status, immigration status, sexual orientation, and gender identity. As of 2014, Multnomah County found statistically significant disparities for communities of color in rates of access to prenatal care, low birth weight babies born, infant mortality, and sexually transmitted infections. Lack of timely and affordable health care is one driver of these inequities. The intersectionality of economic justice, political power, racial justice, social justice and inequitable resource availability can no longer be ignored.

The One Key Question® initiative has been our proactive approach to ensure that all women of reproductive age receive the preventive reproductive health care they need, based on their own goals, and the right to choose if and when to have children. By routinely screening with the question, "Would you like to become pregnant in the next year?" and providing four possible response categories (Unsure, Yes, No, Ok Either Way), providers are not only identifying opportunity for contraception and preconception care, they are integrating reproductive health into primary care. This initiative will improve health outcomes in maternal and child health by supporting patients in whatever their answer may be.

Multnomah County has the opportunity to be a leader to uplift women and families. Through policies and practices that uphold the values of reproductive justice, we can provide better healthcare for our citizens. We are standing with our partners today in support for county, state and federal level solutions that ensure affordable and accessible healthcare is within reach for all our communities.

Sincerely,

Michele Stranger Hunter
Executive Director

Zeenia Junkeer
Director of Equity & Community Engagement

Hannah Rosenau
Director of Policy & Quality Improvement

NARAL Pro-Choice Oregon

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FOR: ✓ AGAINST: _____

NAME: Cascade AIDS Project / Tyler TerMeer

CONTACT INFORMATION (optional):

ADDRESS: 208 SW Fifth Ave, Suite 800

CITY/STATE/ZIP: Portland, OR, 97204

PHONE: _____ E-MAIL: _____

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March 28, 2016

Dear Multnomah County Board of Commissioners:

We know that access to safe, affordable, culturally competent and comprehensive reproductive health care throughout life plays a key role in the well-being of our bodies, families and communities, from screenings and treatment for cancer and sexually transmitted infections to contraceptive solutions, abortion care, prenatal care, labor and delivery services, breastfeeding support, post-partum care and menopausal care. And yet, across the country and in Oregon, we see a barrage of assaults on our communities' access to the services we need, chipping away at our ability to make healthy decisions for ourselves about what's best for us and our families.

That's why we are excited that on Tuesday, March 29, you will hold a briefing on the state of reproductive health access in Multnomah County, to learn about real barriers for our communities and support comprehensive reproductive health care for all people. This is the first step in passing a countywide resolution lifting up the need to increase access and affordability and resist attempts to further limit services or criminalize pregnant and parenting people.

Having our county say through this briefing and a future resolution that every person who calls Multnomah County home should be able to access the reproductive health services they need will ensure the communities we serve, work with and represent are more likely to live full, healthy lives without barriers to care.

Supporting this effort is important to our organization because as the prognosis for people living with HIV has improved, Cascade AIDS Project and the public health community have increased their focus on quality-of-life issues as well as length-of-life issues. Regardless of HIV status, the ability to express oneself sexually and the desire to experience parenthood are, for many, central to what it means to be human. Therefore, acknowledging these needs and aspirations is essential to vindicating the basic human rights of HIV-positive people.

Thank you,

Tyler TerMeer
Executive Director
Cascade AIDS Project

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS' MEETING
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MEETING DATE: 3/29/16

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Upstream Public Health

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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March 22, 2016

To: Multnomah County Board of Commissioners
From: Mel Rader, Executive Director of Upstream Public Health
Re: Support for reproductive health care resolution



Everyone deserves having access to health supports, yet women of color face obstacles in our health care system in creating and maintaining reproductive health. We have a collective responsibility to remove these barriers. Upstream Public Health (Upstream) is pleased to submit testimony in support of a resolution on the importance of addressing disparities in reproductive health care for women of color living in Multnomah County. Upstream is a statewide nonprofit dedicated to improving the health of all Oregonians through sound policy. This resolution could also help motivate our state and federal elected officials to expand access to reproductive health and help take down barriers to healthy reproductive outcomes for women of color.

Women of color living in Multnomah County show worse outcomes than non-Latina whites in almost every area of reproductive health, including higher rates of teen birth and unintended pregnancies; lower access to prenatal and postnatal care; worse birth outcomes; and higher incidence of infant mortality; among others. We've pulled out some of the most salient examples for women of color residing in the county:

- Latina teens in Multnomah County have a birth rate twice as high as their white, non-Latina counterparts, which can affect high school graduation and future job earnings¹.
- Native American and Alaskan Native women, relative to white non-Latina women, have higher proportions of unintended pregnancy; lower proportions of early and adequate prenatal care; and are more likely to experience postpartum depression².
- African American mothers are almost two times more likely than their white, non-Latina counterparts, to give birth to a low birth weight baby. Low birth weights can be an indicator of poor health for the child and an increased risk of infant death³.
- African immigrant women report poor, even frightening, experiences with their pre and postnatal health care providers, and during childbirth; indicating a lack of cultural responsiveness in care⁴.
- Pacific Islanders in their first trimester of pregnancy are more than two and a half times less likely than their white, non-Latina counterparts to access prenatal health care. Teen birth rates are 33 percent, exceeding that of non-Latina whites by 12 percentage points⁵.

The data shows a clear imbalance of who is accessing care and who is not. It also shows that we have a lot of work to do to ensure women of color feel safe and welcome accessing health care. The disparities in reproductive health outcomes for women of color living in Multnomah County need to end. We urge you to pass this resolution.

Sincerely,

Mel Rader, Executive Director

Claudia Arana Colen, Health Equity Manager

¹ Clapp, B. (2013). Latino Youth in Multnomah County, Community Health Assessment Brief, 8(2), 1-3. Portland, OR: Multnomah County Health Department, Office of Policy and Planning.

² Tran, S. et al. (2014). Maternal, Child, and Family Health Data book, Multnomah County, Oregon, 1-82: Portland, OR: Multnomah County Health Department Community Epidemiology Services.

³ Bates, L., Curry-Stevens, A. & Coalition of Communities of Color (2014). The African-American Community in Multnomah County: An Unsettling Profile. Portland, OR: Portland State University.

⁴ Reyes, M. & Curry-Stevens, A. (2015). Community Assessment of African Maternal Health in the Portland Region: Drivers for Community Health Services, and Institutional Change. Portland, OR: Center to Advance Racial Equity, Portland State University.

⁵ Gaonkar, R. et al. (2015). Health Disparities among Pacific Islanders in Multnomah County: A Supplement to the 2014 Report Card on Racial and Ethnic Disparities, Portland, OR: Multnomah County Health Department

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS' MEETING
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MEETING DATE: 3/29/16

AGENDA ITEM # B.1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Basic Rights Oregon / Andrea Zekis

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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To: Multnomah County Commissioners
From: Andrea Zekis, Policy Director, Basic Rights Oregon
Date: March 22, 2016
Re: Reproductive Health Proclamation

Chair Kafoury and Members of the County Commission. Thank you for the opportunity to come before you all today to talk about this important issue.

My name is Andrea Zekis and I am the Policy Director at Basic Rights Oregon, a statewide advocacy organization representing thousands of gay, lesbian, bisexual, transgender and queer people. I am here today because every week I hear from LGBTQ Oregonians about the challenges they face in accessing the health care they need and from providers and communities that support them and their families.

I specifically want to address the unique challenges transgender people face in accessing reproductive health services. A transgender person is someone whose sex at birth is different from who they know they are on the inside. This is often unclear for health providers, because one's gender identity is not defined by surgical procedures or one's outward appearance, but rather an internal sense of what you know your gender to be on the inside.

For example, we regularly hear stories from transgender men who experience discrimination or uncomfortable interactions with providers when trying to access reproductive services. It is not uncommon for transgender men to live as adults with some or all of their original reproductive organs, meaning they have not had hysterectomies, and as such may need access to women's reproductive health care—such as annual cancer screenings, birth control and sometimes even abortion services.

Regrettably, there is a lack of transgender competent providers in Oregon, creating an unwelcoming and often stigmatizing environment that discourages them from accessing lifesaving care or preventing an unintended pregnancy. We have heard countless stories of transgender men avoiding their reproductive health, rather than enduring the awkward and embarrassing encounters in waiting rooms and conversations with health providers.

As a result, Basic Rights Oregon supports of a county wide resolution that addresses the needs of all communities accessing a broad range of affordable reproductive health care options.

All LGBTQ people should have affordable access to reproductive health care services from knowledgeable providers. There are groups working in Multnomah County to make reproductive justice a reality for more communities. I'm asking you today for your support and acknowledgement of the need through this resolution.

Finally, we call on the county to track data for LGBTQ people who access county services so we can better understand the disparities across the county.

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MEETING DATE: 3/29/16

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Oregon Midwifery Council / Silke Akerson

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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March 28, 2016

RE: Briefing on the state of reproductive care access in Multnomah County

Dear Chair Kafoury and County Commissioners,

Thank you for holding a briefing on this important topic. My name is Silke Akerson and I am a mother and a midwife in Portland. I am also the director of the Oregon Midwifery Council which is the professional organization for midwives attending home births and birth centers births in Oregon. Our organization promotes family-centered and evidence-based maternity care for all families in this state.

As you will hear today there are many barriers to the culturally relevant, safe, and effective reproductive care that the residents of Multnomah County need. I would like to draw your attention to just two birth and postpartum care needs that may not be addressed by others in this forum.

First, low-income pregnant women who are covered by the Oregon Health Plan have been able to choose a home birth or a birth center birth with a licensed midwife since 1993 but are now experiencing major barriers to this maternity care option. Midwifery care is a safe and satisfying option for healthy women experiencing low-risk pregnancies and about 5 percent of births in Multnomah County are planned out-of-hospital births. Since January 1, 2015 new rules have been in effect that were meant simply to ensure that OHP only covers low-risk of out-of-hospital births but the approval process is now so complex and biased that many low-risk women are being denied coverage or enduring months of stress and scrutiny while they wait to learn whether their care will be covered. Many women and families have written letters to the Oregon Health Authority expressing their concern about the new approval process but their concerns have not been addressed. If any of you are interested in hearing more about this issue I would be happy to provide more information and testimony from families who have been affected.

Second, there is an incredible lack of postpartum care for new mothers and babies in Multnomah County and all across the U.S. New mothers and newborn babies need consistent support and guidance around the profound physical, social, and emotional transitions they are going through in order to stay healthy, succeed at breastfeeding, and prevent or identify postpartum mood disorders. In countries with excellent maternal and infant health outcomes new mothers are visited in their homes by a postpartum nurse or midwife who checks that mother and baby are doing well physically and that they have the resources they need if any issues, such as breastfeeding problems or mental health concerns, arise. By contrast, in Multnomah county very few new mothers see a health care provider at all after giving birth before the 6 week check-up. This lack of integrated postpartum care for mothers and babies has profound effects on breastfeeding rates and leaves mothers and babies vulnerable to undiagnosed and untreated health issues. It would be wonderful if Multnomah County would lead the way in creating a program of postpartum home visits for all mothers and babies.

Thank you for your consideration,

Silke Akerson, CPM, LDM
Oregon Midwifery Council

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MEETING DATE: 3/29/16

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Roberta Hunte

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: 503-453-5107 E-MAIL: hunte@pdx.edu

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Chair Kafoury, members of the County Board of Commissioners, thank you for reading my testimony.

My name is Roberta Hunte. I live in Portland, Oregon. I am an African American woman and am speaking to you as someone who has had a stillbirth in a Portland hospital, and as an educator at Portland State University in Women, Gender, and Sexuality Studies and Black Studies. I strongly support further County work to address the needs of all communities to access a broad range of affordable reproductive health care options, including the passage of a resolution affirming these needs. I am excited to see the actionable interventions that can come from such a resolution. Gearing our focus towards providing comprehensive reproductive health care for all people in our county will result in measureable improvement in people's lives.

As an educator teaching a class on Reproductive Justice students tell me of the inadequate care they received. Students share experiences of limited sex education— very few knew what comprehensive sexual health education was in schools. College is where most of them learned basic sexual health that goes beyond, 'wear a condom.' This has major consequences as students may engage in unsafe sexual practices. As an educator I look back on my sexual practices in my youth and recognize how unsafe and ignorant I was. I was unscathed, but that is more about dodging harm than any sexual savvy on my part. By choosing this resolution we can prioritize comprehensive sexual education for all members of our county regardless of age, gender, and sexual orientation.

My hope for our county is that going to a doctor to access reproductive health care will be informative and welcoming. When I was pregnant and went to my first visit to a midwife at a clinic, I was asked if I was drug using. I was told that if I refused drug testing my child could be introduced to DHS if anything was found in their system at birth. I was racially profiled at my first visit to a midwife. This was different than the experience of my white pregnant peers.

I am college educated, a professional, and I thought a good advocate for my needs. I left that midwife and found a new doctor who welcomed me, my autonomy, and was excited for my child. Unfortunately, at 22 weeks I went into preterm labor. I faced an on-call doctor at a Portland hospital who dismissed my needs and did not check my body despite my visit to the maternity ward. It meant that my labor pains were misdiagnosed as gastrointestinal distress, my primary doctor was never called, and I left the maternity ward armed with hydrocodone to labor at home. I returned within 7 hours in excruciating pain, had a placental abruption, and only then was examined by the doctor on call. I was told that my pregnancy was not-viable as my sac came through my cervix. It was awful to lose my daughter. I was more tortured by a sense that she and I had been failed by this system. I did not have a doula. I wish I had been assigned a doula at the beginning of my pregnancy. I needed someone to advocate for me. My ignorance and a colorblind inept system contributed to my first and only pregnancy becoming another example of the high rates of stillbirth among black women.

As a black woman I face the realities of high infant mortality rates. When I engaged the reproductive health system, despite my insurance and education, my blackness stereotyped me. I want a county where practitioners are trained in cultural awareness, implicit bias training in service delivery, and have an explicit mandate to eradicate white dominance in health care delivery. I want doulas to be widely incorporated into the healthcare system at the early stages of pregnancy. I know that if my caregivers had recognized my pain and been curious to dig

deeper we would have at least averted some of the distress around my stillbirth. In my case if the doctor had come to see me, which she didn't, and checked my cervix, which no one did, we would have known that my cervix was softening and potentially dilating. Had I had a doula maybe I would have had another advocate to take my needs seriously and to alert the system to care and to act.

We can do better. Your continued work on a resolution has the ability to move equity forward in our county's reproductive health system. Thank you for reading my testimony. I would be happy to talk with you as needed.

Regards,

Roberta Hunte, PhD
Portland State University
Black Studies and Women, Gender, and Sexuality Studies
503-453-5107
hunte@pdx.edu

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FOR: x AGAINST: _____

NAME: Jamee Greer

CONTACT INFORMATION (*optional*):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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Dear Chair Kafoury and Multnomah County Commissioners,

My name is Jamee Greer and I live in North Portland. I am a gay man and I identify as queer.

I believe that reproductive justice will be achieved when we all have the economic, social, and political power to make healthy decisions about our bodies, genders, sexualities, families, and communities in all areas of our lives without fear of discrimination, exclusion, or harm.

As a queer person, reproductive justice matters to me because I can see the many barriers that impact my community and how they connect, compound, and complicate the decisions we must make about our own bodies and health as LGBTQ people; barriers that impede access to the resources, information, and services that are necessary to make the best choices for ourselves and our families and loved ones.

HIV and STI testing, prevention, and education are so incredibly important to me as a member of Portland's queer community. Men who have sex with other men are disproportionately impacted by HIV/AIDS; and even more so impacted are communities of color within the LGBTQ spectrum. Portland, Multnomah County, and the State of Oregon have shown a profound leadership on including the needs and impact of LGBTQ folks in policy and budget decisions. News of the Cascade AIDS Project's LGBTQ Primary Care Clinic opening in 2017 - or the pronouncement by the County of this week as "Lesbian, Gay, Bisexual and Transgender Health Awareness Week" - all reflect the BRAVE, inclusive, and welcoming values many of us share as Portlanders.

The County's leadership on this is important to me because having access to comprehensive reproductive health care means access to HIV testing and prevention tools. This includes both Pre- (PEP) and Post-Exposure Prophylaxis (PrEP), which are medications that can prevent HIV infection. I am currently on PrEP, a single pill I take each day that is one tool in the toolbox to prevent HIV. I am also fortunate to have insurance that covers my medication; my last 30-day prescription was \$1,941 and cost only a \$30 co-pay out of pocket. Cost is not the only barrier my community faces; education on these medicines and how and where to obtain them also matters. Every chance we have to talk about prevention within the LGBTQ community helps us thrive as a whole community.

This briefing is a first step towards the greater discussion around reproductive justice. I urge Multnomah County to move forward with us to deepen its commitment to this work - and build with BRAVE to find ways to ensure all people who live in the County have access to the full-range of reproductive health care, including all LGBTQ people.

Thank you for your time, consideration, and leadership.

Respectfully,

James (Jamee) H. Greer, III

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FOR: x AGAINST: _____

NAME: Marina G. Barcelo

CONTACT INFORMATION (optional):

ADDRESS: 5636 NE 17th Ave

CITY/STATE/ZIP: Portland, OR 97211

PHONE: 831-320-7429 E-MAIL: marina.barcelo@gmail.com

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Dear Chair Kafoury and Multnomah County Commissioners,

My name is Marina Barcelo, and I am a leader within the We Are BRAVE (Building Reproductive Autonomy and Voices for Equity) coalition. I am the former Director of Equity & Community Engagement at NARAL Pro-Choice Oregon, and I now spearhead equity and inclusion initiatives at Portland State University's School of Social Work.

I believe that reproductive justice will be achieved when we all have the economic, social, and political power to make healthy decisions about our bodies, genders, sexualities, families, and communities in all areas of our lives without fear of discrimination, exclusion, or harm.

I have been working in reproductive justice advocacy for 10 years, and there is not a more urgent time than this one. Reproductive health options are only meaningful choices if they are affordable, and my work has shown me that **access is still out of reach for too many Oregonians**. Cultural stigma and concrete policy restrictions on coverage for contraception, abortion, prenatal and postpartum services still create barriers to care, which have a disproportionate impact on low-income individuals, people of color, documented and undocumented immigrants, youth, and LGBTQ Oregonians.

As a brown, queer woman, I understand the many barriers that impact my communities--that impede access to the resources, information, and services necessary to prevent an unintended pregnancy or to carry a pregnancy to term. Far too often, my communities are not granted the basic freedom to make decisions about our own health care, our economic security, and what is right for our families. This freedom is vital to all our health, well-being, safety, and ability to participate equally in society, and it's time that we lift this truth up in Multnomah County.

The County's leadership on this is important to me because having access to comprehensive reproductive health care is necessary to my ability to survive and thrive. The ability to make decisions about my body, my sexuality, my relationships, and my family directly impacts my right to self-determination.

This briefing is a powerful first step, and I ask that Multnomah County move forward with us to deepen its commitment to reproductive justice and work with BRAVE to find ways to ensure that all people in the county have access to the full range of reproductive health care, including abortion.

Thank you for your time and support.

Marina G. Barcelo

**MULTNOMAH COUNTY BOARD OF COMMISSIONERS' MEETING
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MEETING DATE: 3/29/16

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Charley Downing

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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Hello, thank you Chair Kafoury and County Commissioners for this opportunity.

I am Charley Downing, a resident of Multnomah County. I work for a non-profit organization providing direct services for people experiencing pregnancy. I also worked for many years with young people dealing with mental health and addiction. I am a leader in the We Are BRAVE (Building Reproductive Autonomy and Voices for Equity) coalition.

For myself, continuous and meaningful access to reproductive health care would have meant earlier STI/D care, which, I have been told, could have prevented the occurrence of irregular and cancer causing cells in my body today. Life has ups and downs, but we must all agree that through good and ill health, divorce, loss of work, and other life events we should not lose our access to healthcare. My inability to consistently afford health insurance or qualify for assistance prevented me from taking steps earlier in regard to my health, and over the last two years I have seen this impact my ability to fully care for my son, and be the mother I wanted to be. Though I am grateful that I can access regular checks on my health, I am filled with anxiety each visit. I wonder how I will possibly manage a positive result. My employer does not provide health benefits. I purchase insurance on the exchange, and I can afford it, barely. My coverage is limited and deductibles are high. I know that I am fortunate, but my budget could not handle any surprises. I am now getting ongoing testing that I need, but on the other hand, I don't fill prescriptions that my insurance won't cover, such as an inhaler for my asthma. I cancelled dental insurance, because though I need serious dental work, high deductibles make it unaffordable anyway. Though I have struggled, I know that I have been luckier than many.

In my work with people around pregnancy and with young people in residential mental health and addiction, I have seen how people are desperate for the stability that access to the full range of reproductive health care would bring. I can hear the fear and powerlessness in the voices of folks who find themselves unable to afford abortion care that their insurance companies do not cover. Too many people are already, like me, in a place where their budgets cannot handle sudden strains, particularly regarding the health of their bodies.

In particular, I am deeply concerned to hear from our veterans who can become pregnant. I have learned that they often struggle to find primary care, based on their gender. Our service women deserve equal access to healthcare. And for people in domestic violence situations, the inaccessibility of continuous reproductive health care services can mean the difference between being able to make healthy changes, and not. When people cannot access abortion care, that they have decided is the best for them at that time, they are more likely to fall into or remain in poverty and are less empowered and less able to leave violent relationships. Finally, I hear often from our undocumented and hard working families. They too deserve access to the full range of reproductive care, and need it. Communities are stronger, healthier, and more productive when we all have access to the care we need.

Your efforts support us all as we strive to make the best decisions for our bodies and for our families. As BRAVE individuals and as a BRAVE community we say that Multnomah County

believes in justice, believes in healthy families, and supports affordable and safe reproductive health options for all people. Thank you for standing for healthy communities and continuing to work with us to pass a resolution lifting up this vision and the challenges our communities currently face.

Thank you for your time.

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AGENDA ITEM # B.1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Owen Smith

CONTACT INFORMATION (optional):

ADDRESS: 2630 NW Vaughn St, Apt. 7

CITY/STATE/ZIP: Portland, OR 97210

PHONE: _____ E-MAIL: _____

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Chair Kafoury and members of the Multnomah County Commission,

Thank you for the opportunity to share my written testimony today in support of further steps toward reproductive health access for everyone in our County.

My name is Owen Smith and I am a White-passing gay and transgender person who lives in NW Portland.

Since moving to Multnomah County from Utah a little over a year ago, I have had the ability to access many wonderful things that I did not have access to in Utah, like dentists I didn't have to explain my transgender identity to and public service professionals who I only needed to tell I was transgender to be called my name and correct pronoun.

This has not always been the case for me. While living in Utah, I was turned away from 5 different care providers when I needed access to Plan B. One clinic even said to me, "You should be thankful that God has given you the opportunity to become pregnant." Another clinic refused to believe that I could be pregnant even though I explained that I was transgender and still had the genitals I was born with, despite my masculine appearance and body features. They actually said, "Everyone know all transgenders have penises" to me. That was a horrible and humiliating experience that I wish to never have to go through again.

Unfortunately, since arriving in Oregon, I had to go to several health care providers before I was able to find someone who would be okay with the fact that I have finished my transition where it is now and who would understand that transgender bodies such as mine can conceive and carry pregnancies to term and have specific needs in terms of our reproductive care.

I went to several potential practitioners before I settled on my current one, who has agreed to treat my body as it is and has done research on what bodies like mine need for healthy lives. It was really frustrating to have to educate my healthcare providers on my body. It's also really humiliating to explain what body parts I do or don't have and if I can relate or if I hate them with strangers.

The work the County has been doing to lift up transgender experiences, create gender neutral bathrooms and ensure staff and providers have adequate training is crucial, and ensuring that transgender voices are included in the picture of people accessing reproductive health care is a necessary next step. It will mean that transgender young people like me won't be turned away from treatment they need, won't need to explain to their doctors why they want non-hormonal birth control, won't need to educate their doctors on what gender-affirming care does or doesn't do to bodies and how that will or won't impact abilities to have children, or explain how even though someone may look like and identify as a man, they may want to carry a pregnancy to term.

Thank you for partnering with the We Are BRAVE Coalition to lift up the full range of reproductive health care needs our diverse communities have, and why it is critical that everyone in our County has access to the care they need to thrive. I urge you to continue this momentum by passing a resolution to highlight this commitment.

Thank you for your time and for hearing my story.

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MEETING DATE: 3/29/10

AGENDA ITEM # B1 OR NON-AGENDA SUBJECT: _____

FOR: x AGAINST: _____

NAME: Kara Carmosino

CONTACT INFORMATION (optional):

ADDRESS: 5250 NE 31st Ave.

CITY/STATE/ZIP: Portland, OR 97211

PHONE: 814-440-0365 E-MAIL: kara.carmosino@gmail.com

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Multnomah County Board of Commissioners:

Thank you so much for hearing my testimony today, and for holding this briefing. My name is Kara Carmosino, and I live in NE Portland here in Multnomah County. I have participated in the We Are BRAVE (Building Reproductive Autonomy and Voices for Equity) coalition since 2013, first as a volunteer with the Asian Pacific American Network of Oregon (APANO) and then as a staff member.

I am here today to share my experience as a queer person who was misdiagnosed by a provider who did not understand LGBTQ sexual health. When I was in college, I got sick and went to a health provider on my campus to get diagnosed. I told the person I saw that I thought I had a sexually transmitted infection given my symptoms and the sex I was having. She dismissed my concerns, told me that wasn't possible due to who my sexual partners were and sent me away believing I just had a cold. A couple days later the health center called back with a lab test result to say I'd been right after all and needed to come back in to get the proper medication.

I was lucky—I had health insurance through my school, I could afford the medication and I had time to go back to the clinic—but even I hadn't known how to tell my provider how I felt or why I thought she might not know what I needed. Especially as a young person who had recently come out, trying to educate my healthcare provider on my health needs and life experiences was not only frustrating, it also felt scary and uncomfortable. The shame and stigma that surrounds sexually transmitted infections only compounded the difficulty of speaking up. For so many others, providers dismissing their concerns, misunderstanding their needs, or fully misdiagnosing them can have devastating and long-lasting consequences.

Reproductive health care, including testing and treatment for STIs, is something we need throughout our lives, and it matters to everyone, no matter who we are, where we live or who we love. Like so many others, I know firsthand that care is not really accessible if it's not affordable, culturally competent and safe.

As we still have a long way to go in our county, state and nation to ensure all people have access to the care they need, this briefing is a crucial step to lift up our experiences and continue to explore solutions together. It wasn't until I joined BRAVE that I found a space for people who looked like me—communities of color, LGBTQ communities—to lead the way on expanding reproductive health access, through so many of us are the ones who experience barriers or disparities in outcomes. Continuing to support our leadership in addressing these health inequities is important, and I am grateful for the County's work in making today's briefing a reality and also designating this week as LGBT Health Awareness Week. I look forward to seeing what future steps can emerge in our continued partnership to ensure all of us have the care we need to make healthy decisions for ourselves and our families.

Thank you again for your time and consideration today.

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MEETING DATE: 3/29/16

AGENDA ITEM # B.1 OR NON-AGENDA SUBJECT: _____

FOR: X AGAINST: _____

NAME: Jacqueline Altamirano Marin

CONTACT INFORMATION (optional):

ADDRESS: 21710 NE Palisade PL

CITY/STATE/ZIP: Fairview, OR 97024

PHONE: _____ E-MAIL: _____

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March 28, 2016

Jacqueline Altamirano Marin
Western States Center
21710 NE Palisade PL, Fairview, OR, 97024

Hello Chair Kafoury, members of the county Board of Commissioners,

Thank you for the opportunity to come before you all today. My name is Jacqueline Altamirano Marin and I am an organizer, immigrant, and recent college graduate.

I'm writing today to testify in support of ongoing work by the County, including the future passage of a resolution, to address the needs of all communities accessing a broad range of affordable reproductive health care options. This work is important to me because I believe that everyone should be able to live a happy and healthy life, regardless of their race, sexual identity, immigration status, and so many other factors that unfortunately, hinder people's ability to have access to the reproductive health services they need to thrive.

As a fully bilingual person I'm often asked by family members and friends to help navigate the complex and intimidating health care system. I am a long time Oregonian (spending the last 20 of 24 years of my life in Oregon), and community organizer that specializes in reproductive justice, so I know where I need to go to access reproductive care, and luckily am able to afford a broad range of reproductive healthcare services. However, I am one of too few people from my communities that has access to reproductive health care. As a Latina and immigrant, I have too many friends, neighbors, and family who ask for help because often times health services are unavailable because of their documentation status, or unaffordable. Moving forward beyond today's briefing with next steps, including a resolution, would ensure that the right steps are taken to make reproductive access available to all.

Your continued leadership would impact so many people that right now have no resources, information, or support to get the resources they need to have healthy happy lives

Thank you for the opportunity to testify before you today.

Jackie Altamirano

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FOR: X AGAINST: _____

NAME: Cindy G.

CONTACT INFORMATION (optional):

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____ E-MAIL: _____

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Multnomah County Commissioners,

Hello, my name is Cindy G. and I live in NE Portland. I am a multiracial, working mother of two and social justice advocate. I'm writing in support of the creation of a county resolution that addresses a full range of reproductive health care options. I care about equity and access for all members of my community and the right to self-determination, particularly when it comes to one's own body and health care choices.

My story begins in the 7th grade when my sister Beth was a senior in high school. During that time there was a lot of confusion in my home. One day, Beth announced that she was pregnant after having sex for the first time. Realizing that she was not in a position to take on the responsibilities of becoming a mother, she sought to have an abortion, even though my parents had mixed emotions about this. Amidst a sea of protesters, slinging judgment and hatred, my sister walked bravely into the closest clinic, two hours away from our home, to receive services. Making the choice that was best for her at the time, Beth has worked hard to overcome the stigma and shame that society places on women and transgender people who choose abortion. As a younger sister, not even 12 years old, I didn't understand all that was going on, or the full range of what goes into that decision. However, 30 years later, as a mom of two children, I found myself in a situation where I, too, came head to head with the decision to have an abortion.

Clearly I was in a different position than my teenage sister when I faced this decision. I was a 40 year old adult with a job, a mother with kids, and in a loving relationship with my husband. And I had health insurance, which paid for my procedure. I know that I am one of the few fortunate ones since insurance coverage for this procedure is not typical with most people's health plans. I believe that health insurance coverage for procedures like abortion should be the standard in reproductive health care. Furthermore, I am grateful to say that I had an amazing, supportive health care provider who offered me quality care without judgment or imposing her own beliefs. She helped me navigate the system and figure out the choice that was best for me and my family during that challenging time. Unfortunately I am keenly aware that this type of respectful and dignified reproductive health care between patient and provider is commonly a rare exception instead of the norm. I want this to be the norm!

I hope you will join BRAVE leaders and others like me in saying that all members of our community deserve the chance to receive supportive and respectful reproductive health care options that allow people to choose what's best for themselves and their families. Continuing to elevate the work of coalitions like BRAVE and partner with us on future projects, such as passing a resolution, will affirm this vision and move us another step forward toward the day where the level of care I experienced is the reality for all in our County.

I thank you for your time and for listening to my story.

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FOR: X AGAINST: _____

NAME: Carla

CONTACT INFORMATION (optional):

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Dear members of the Multnomah County Board of Commissioners,

Thank you for hearing my testimony in support of the work you are doing to address the needs of all communities accessing a broad range of affordable reproductive health care options.

My name is Carla, a young woman who had barriers upon barriers, with hopes of a better future. Both my parents were killed in Mexico when I was seven. I was sent when I was twelve to live with my aunt, her husband and their two children. Coming to the United States alone and scared, I thought would be the worst thing that could happen to me after losing my parents. But I was wrong!

I was barely figuring out how to speak Spanish because my first language was an indigenous language. English was even harder than Spanish so I struggled to communicate with anyone. I started hanging out with a crowd of kids that seemed to be my friends and understood what coming to the US was like without parents. I fell in love with one of the guys there and ended up being pregnant. After being forced to sell drugs I knew it wasn't love and that I needed to get out of that horrible situation.

It was one friend, Esmeralda, who helped me when no one else would. She had been living here for 5 years and knew the language a little better. She is the eldest of 5 siblings and daughter to hard working farmworkers. She provided me with a safe space and helped me get my needs met. With the little money I was able to save, I went to get an abortion and had Esme go with me.

We couldn't let her parents find out as they were Catholic and they didn't believe in having abortions. I hated that I had to put my friend in a difficult situation to help me but I could not think of any other way out. My aunt and her husband never found out because I knew that if they did, I would no longer have a place to live. I was able to escape the hell I was living but I really wish I would have had more options available. Being undocumented I had no health insurance and had to pay for the abortion completely out of pocket.

I urge you to take further steps and support a county wide resolution that addresses the needs of all communities accessing a broad range of affordable reproductive health care options so that no other teen has to go through the same struggle that I did.

Thank you again for the opportunity to testify.



Support Access to the Full Range of Reproductive Health Care Through A Multnomah County Proclamation

Healthy, thriving families lead to strong, resilient communities.

When we are healthy, we are more likely to live fulfilling lives and contribute to a vibrant and productive county and community. Yet there is still work to be done to ensure all people have the safe, affordable health care they need to thrive. Passing proactive local and state legislation is a key step to ensure all Oregonians are able to decide when and whether to parent based on what's best for themselves and their families.

All Oregonians need access to safe, affordable, culturally competent and comprehensive reproductive health care, from screenings and treatment for cancer and sexually transmitted infections to contraceptive solutions, abortion care, prenatal care, labor and delivery services, breastfeeding support, post-partum care and menopausal care.

Reproductive health options are only meaningful choices if they are affordable. Currently, access is still out of reach for too many Oregonians.

While the Affordable Care Act opened up access to many reproductive health care options, stigma and restrictions on coverage for contraception, abortion, prenatal and postpartum services still create barriers to care. These restrictions have a disproportionate impact on low-income individuals, people of color, immigrants, youth, and LGBT Oregonians, who are often disadvantaged in getting the resources, information and services necessary to prevent an unintended pregnancy or to carry a pregnancy to term.

- As of 2014, Multnomah County found **statistically significant disparities** for communities of color in access to prenatal care, low birth weight babies born, infant mortality, and sexually transmitted infections. Lack of timely and affordable health care is one driver of these inequities.
- Women who carry an unplanned pregnancy to term are **three times** more likely to fall into poverty within **two years**. Access to reproductive health care and economic security are closely linked.
- Up to **14,400** Multnomah County residents are affected by federal restrictions on abortion, including federal employees, veterans and those covered through Indian Health Service.
- For those in Oregon with private insurance, only 85% of plans cover abortion and for those that do, high deductibles ranging from **\$1000 to \$6600** for an in-network provider make the procedure unaffordable and therefore inaccessible for many people. The average out-of-pocket cost of abortion services nationally is **\$500** and can range up to **\$3,500** depending on the procedure.
- Stigma and discrimination still impacts the health care we receive. In Oregon, **22% of transgender people** report being refused medical care.

Passing a Multnomah County proclamation will:

- call attention to disparities in health access and health outcomes, as well as the stigma, barriers and restrictions that create them;

- emphasize reproductive health access as a health equity issue for low-income individuals, people of color, immigrants, youth, and LGBT Oregonians;
- show public leadership on the need for safe, affordable healthcare that is within reach for all our communities.

We Are BRAVE (Building Reproductive Autonomy and Voices for Equity)

In 2013, Western States Center launched the We are BRAVE (Building Reproductive Autonomy and Voices for Equity) project to prevent further weakening of family security and self-determination while being more pro-active in achieving reproductive justice. We Are BRAVE includes over 50 leaders of color and six organizations in Oregon working to strengthen their understanding of how reproductive justice intersects with their work in immigrant rights, youth movements, health equity and Tribal sovereignty, coach organizations and leaders to take a public stance on reproductive rights and reproductive justice, and foster alliances to build a strong field of reproductive justice advocacy.

Organizational partners in We Are BRAVE are:

- Asian Pacific American Network of Oregon (APANO)
- International Center for Traditional Childbearing (ICTC)
- Momentum Alliance
- Mano a Mano Family Center
- Oregon Latino Health Coalition (OLHC)
- PCUN: Pineros y Campesinos Unidos del Noroeste

Individual leaders include community health workers, organizers, directors and staff of base-building organizations, professors, students, and faith leaders.

Other Endorsing Organizations

This Multnomah County proclamation has also been endorsed by:

ACLU of Oregon	National Asian Pacific American Women's Forum
APIA Health Forum	Oregon Community Health Workers Association
Backline	Oregon Foundation for Reproductive Health
Basic Rights Oregon	Oregon Health Authority Office of Equity & Inclusion
Breastfeeding Coalition of Oregon	Oregon Oral Health Coalition
Cascade AIDS Project	Oregon Public Health Institute
COFA Alliance National Network	Partners for a Hunger Free Oregon
Center for Intercultural Organizing	Planned Parenthood Advocates of Oregon
Coalition of Community Health Clinics	Spect-Actors Collective
Family Forward	Upstream Public Health
Impact NW	Urban League of Portland
Micronesia Islander Community	Western States Center
NARAL Pro-Choice Oregon	YWCA of Greater Portland

Reproductive Justice Spoken Testimony

- Mariotta Gary-Smith
 - Emily Lai
- Carina Guzman Gamez
- Zeenia Junkeer

Multnomah County Resolution

Briefing Multnomah County Reproductive Justice Resolution

March 29, 2016

Testimony of:

Mariotta Gary-Smith, MPH, CSE

We are BRAVE, Western States Center

Good Morning, Chair Kafoury, fellow Commissioners, my colleagues, presenters, and community members:

My name is Mariotta Gary-Smith; I'm a second generation Portland native and current resident. I appreciate the opportunity to share with you today my perspective, experiences, and encouragement of the County to continue to work with our communities in ways that lift-up the need for reproductive justice values.

I've been asked to share with you today as a community member and advocate. I identify as a woman, a person of color, an educated person, a person who has led a life built on the belief that I have the right to choose how my outcomes will look, and to make decisions about how I live and love. I am also a board member of Western States Center, and in that role, was proud to have helped found a program called We Are BRAVE (Building Reproductive Autonomy and Voices for Equity) several years ago.

BRAVE is a program focused on building the reproductive justice analysis of organizations and leaders of color to advocate for reproductive health care, centering the needs of marginalized communities who can be left out of mainstream reproductive rights work. BRAVE began in 2013 and, to date, has worked with seven organizations, more than 30 individual leaders, and hundreds of volunteers and advocates to advocate in Salem for comprehensive reproductive care for all, and to build visible, meaningful support for reproductive justice within our own communities.

I am joined today by my partners in BRAVE: we've worn purple to show our solidarity. A core group of leaders from BRAVE, with the leadership of organizations such as APANO - the Asian Pacific American Network of Oregon - have been working hard to get us to where we are today.

We are invested in making sure that all people, especially women and transgender people of color, have access to quality reproductive health care services in Oregon. Building support and solidarity among our communities is critical to the reduction of various health disparities, including infant mortality, STI infection rates, and reproductive health outcomes. BRAVE is a way to connect the heart of the issue with policy education, advocacy, and implementation. Understanding how various policies impact our communities, how to engage elected officials like yourself, and providing a platform that includes all communities is crucial to lifting up those most vulnerable.

BRAVE teaches the importance of breaking down stigma by humanizing tough or controversial issues through people telling their own stories. In my life, I have experienced the power of being taught my body is worthy of the best care and treatment and that I get to decide what that looks like for myself.

The summer I turned 16, my mother turned 40. She and I spent some time talking about my future, and how I saw myself. My mother spoke passionately about how she wanted more for me—she wanted me to have all that she'd worked for and to understand why she chose to fight and advocate. **She talked to me about my right to a life full of “unending potential, possibility, and promise.”** She talked about my right to choose, the various choices I would possibly make, and how I would make them. Our relationship was one that supported open and honest conversations, sometimes difficult, about sexuality - especially as it related to me as a young Black woman - and my reproductive health and rights. Our conversation reverberated with historical context, recent history, and choice. We talked autonomy, my bodily autonomy. We talked about how I'd have to make complex decisions about my health and life. We talked about the importance to knowing how to advocate for myself and others. Some of my friends didn't have safe spaces to have these discussions, or have access to information about the various reproductive health options available to them, including pregnancy/prenatal care, contraception, abortion, aftercare or support services.

During my college years, I worked at a reproductive health clinic that provided comprehensive reproductive health services, including abortion. The mission of this clinic was to provide quality, compassionate care to the patients and their families/partners. It was one of the hardest experiences I've had, but I'd do it all again; the importance of making sure that people have the right to make decisions as they see fit, in the scope of their own lives, is most important. Providing access to comprehensive reproductive health care is a powerful way to provide residents with the ability to make

choices as they see fit for their lives. The ability to make choices for themselves about their own bodies is about autonomy: a key value in reproductive justice.

A reproductive justice resolution would impact ME and members of my communities. Women of color, immigrant women, and low-income women who are pregnant know that access to reproductive health services has many roadblocks. Consider what these women might encounter if they have issues with finances, transportation, immigration status, not having childcare/support, literacy issues, addiction or language barriers. All these issues shape the ability of women to seek access to quality care, including safe and legal abortions in a state that is considered a leader in health care reform. That is why a path to citizenship *is* about reproductive justice. Educational equity and economic justice *are* about reproductive justice. As is criminal justice reform. The list is long, yet all important. And despite my privilege, I'm still at high risk to experience reproductive health disparities. So it's crucial to me that I speak for those who cannot sit here before you today.

I appreciate your time and attention today and will do my best to answer questions if asked.

Good morning, Chair Kafoury, County Commissioners, and everyone who is present today. Thank you for the opportunity to come before you all today.

My name is Emily Lai. I am from Taiwan, and moved to Portland to attend Reed College eight years ago, and have been in Portland since. I live right down the street near the Hawthorne food carts. I work at Momentum Alliance, a youth-led social justice non-profit based in North Portland. I help coordinate a program for diverse groups of youth to explore topics around gender, sexuality, and sexual health. I have also participated in the BRAVE coalition since 2015.

I am here today to talk about how reproductive health access has impacted my life, and support the County taking steps to proactively and wholeheartedly address the needs of all communities to have affordable and meaningful access to sexual health care.

I care about sexual health access because I have herpes, not just the oral kind but also the genital kind. I've been sexually active since I was 18 but I did not get tested for herpes until I was 24. Before that, I would get tested for chlamydia, gonorrhea, and syphilis regularly because testing for those was free at Planned Parenthood until you turned 25. But if I wanted to get tested for other STIs, like herpes and HIV, I would have to pay for it. It wasn't until I turned 24 that I decided to get a full STI screening.

At the time, I didn't have health insurance and was working a minimum wage job that would only pay me to work 32 hours a week. The cost of a full STI screening, which was around \$150, was 15% of my monthly income, and that was a big financial burden for me. In spite of that, I went through with it, because I really wanted be responsible to my body and the people I was sharing my body with. In order to do so, I had to sacrifice other things to make it happen: I had to take time off work to make it to the clinic, and for that month, I couldn't afford to ride the bus or eat nutritious food.

Part of making the full range of reproductive health care available includes increasing the accessibility and affordability of full STI screenings. From my experience speaking openly about STIs and working with young people on sexual health access, I know many of us do not get tested for STIs. Many of us don't because the cost of STI screenings, the hours of health clinics, and the culture of shame and silence around STIs. I also know that some people don't always tell people they have an STI. I am open about the fact that I have genital herpes because I want to break the silence and shame around having a sexually transmitted infection because I know that the silence and shame around STIs, is yet another barrier that prevents us from accessing important sexual health services like STI screenings.

As a BRAVE leader, youth advocate and person living with an STI, it is powerful to witness your commitment to hearing stories like mine and the others on this panel. We look forward to working with you on next steps, including the passage of a resolution that affirms the importance of the full range of reproductive health care, including STI testing, for all who live in Multnomah County. I truly believe that a resolution would be a tremendous step in a county-wide and community-wide effort to help remove the barriers to sexual health access—be they financial, logistical, or cultural, especially for the young people in our county.

Thank you for your time and consideration.

Testimony in Support of access to the Full Range of Reproductive Health Care for All

Committee members, I'm thankful to be present today among you.

My name is Carina Guzman Gamez. I live in Troutdale, next to one of Oregon's most beautiful places, the Gorge. I was born and raised in Bogota, Colombia and have lived in the US for the past 7 years. Since then, Portland has seen me become a college graduate, an advocate, and a professional working with latina survivors of sexual assault. I am lucky to call Portland my second home.

Moving wasn't easy. You see, moving to the US in my late teens was one of the most difficult things I have faced: I was exposed to a new language, a new culture, and a different way of living. But one of the most challenging things for me was navigating the systems at first with no health insurance.

I had no information, no knowledge and no money to access birth control. This was scary and a big challenge for me. I had no idea where to go, who to talk to, and how to pay for it. I couldn't talk to my parents about it, I was afraid of their judgement and it wasn't safe for me to talk with them about my choices.

After months of trying to find the ways and resources to pay for birth control, a friend of mine introduced me to Planned Parenthood for the first time. I hesitated to call, after all I did not have the proper documentation and had no insurance to cover my visit. I was so relieved and shocked to hear that I could access free birth control with no insurance or documentation needed. I was sent home with a 12 month supply of free birth control!

Today I am very grateful for the support and information I received from my friend and Planned Parenthood, but I worry because this is not everyone's reality. The program that covered my birth control is no longer funded.

I worry for the many other residents in our county that don't have access to reproductive health care services, and like me, don't know about the resources available. I worry for the survivors of sexual assault that have to seek follow-up medical services for sexually transmitted infections on their own with or without insurance, and cost is a big barrier. I worry about the many other teens that because of shame and lack of information, accessing services for their reproductive health is not an option.

Since I joined BRAVE as an individual leader last year, I have been able to share my own story and connect it with the struggles of other people I know and those I have met through BRAVE. It has been an incredible experience to learn from others in this network and together envision what it would look like if all of us, and those we care about, had access to the reproductive health care we need without shame, fear or stigma.

This is part of why I am here today testifying before you. The ability for us to tell our stories and talk about our BRAVE work is an amazing step and we are grateful to you for creating this space. Continuing to work with our communities to address disparities in access and outcomes would help people in my community, and my young self, to have the option to access reproductive health care services at an affordable cost. It would provide full access to survivors of sexual assault to all the services needed for them to thrive as active members of our communities.

I look forward to seeing the County's continued leadership to give every human the meaningful choice of affordable and accessible reproductive health care in order for our communities to thrive healthy, with autonomy and dignity.

Thank you for your time and for the the opportunity to testify before you today.

Carina Guzman Gamez
3330 SE Pelton Ave
Troutdale, OR 97060

Chair Kafoury, Multnomah County Commissioners,

Thank you for hearing my testimony today.

My name is Zeenia Junkeer, and I am a resident of Multnomah County. I am also an individual leader in the BRAVE coalition and the Director of Equity and Community Engagement at NARAL Pro-Choice Oregon and the Oregon foundation for reproductive health.

Being part of the BRAVE coalition has truly changed my life. It was the first time I was part of such a diverse group of people of color, with shared experiences, talking about reproductive justice and the reproductive rights we all deserve. The space was not only empowering but incredibly safe. It was the *first time I shared about my own abortion experience* and learned about ways to make sure all people have access to the comprehensive range of services and information about their bodies and sex.

When I look at the political landscape and the current environment here in the Multnomah County, I cannot help but feel the disparity. On paper we are an "A" state, with pro-choice leadership, reproductive health experts and services for all. In the field, we have communities who feel disconnected and are mistrusting of the system, providers who do not reflect the communities they serve and are unable to understand the depth of their own biases, and deeply apparent health inequities. Systemic racism, xenophobia, sex based discrimination, gender discrimination and transphobia are prevalent and a real public health concern. Through my work with BRAVE I have learned to recognize and call out these discriminatory practices and have learned to be a strong ally and champion.

In keeping with the idea that all people need access to all forms of reproductive health care to survive and thrive, which permeates the BRAVE work, I would like to share a story of one of our community members here in Multnomah County, with his permission. Grey, was born and raised as a female and knew in his heart and mind he was a man. Grey, actualizing their truth, began taking gender affirming hormones to let him be the man he is today. As a self-identified transgender Afro-Latino gay man, Grey recently tried to access abortion care in Portland. Like many transgender people needing an abortion, Grey encountered enormous challenges. Facing an unintended pregnancy after his doctor insisted he could not conceive and therefore did not need contraception, Grey was coldly asked to leave the clinic when he asked for information on termination. Anxious and confused, Grey and his husband had to navigate a system that is not set up to address the specific reproductive health care needs of transgender people. Unfortunately, the extent to which Grey's reproductive health needs and identity impact his life is felt in this room by

his absence and inability to share his own story for fear of discriminatory treatment from his employer based on who Grey is .

I want to take a moment and once again recognize my privilege. As a non- transgender, able bodied, light skinned, formally educated woman with a full time job, I have access that many others do not. When I needed an abortion, though I was uninsured and only working part-time, I was able to reach out and find the money that I needed for the procedure. I was able to talk to providers and clinical staff about my rights and the expectations I had for my visit, and was able to advocate for my needs. I was able to make it to the visit in my own car and have someone with me when I returned the safety of my own home. And subsequently, when I became insured thanks to an employer who offered to cover half my monthly expenses, I was able to have an IUD placed— something I wanted before but was not able to have done, since the cost, at \$1000, was too high for me out of pocket. I wish that access to comprehensive family planning options were available for under and uninsured people of childbearing age and ability.

My hope for the future of reproductive health services here in Multnomah County is that they continue to be inclusive, meeting community members where they are at and offering unbiased, culturally responsive, compassionate services with minimal barriers. I hope that our transgender community members begin to feel welcomed and respected by all providers and services. That our immigrant and refugee community members can receive the care they deserve, in a manner that feels comfortable, reassuring and competent, and that no one in our county is denied services based on their documentation status. My hope is not that I can simply continue to use my privilege and what I have learned during my time with BRAVE to make sure I receive the care I need, but that my family, my community and my friends can all receive the care they deserve, regardless of who they are.

We need to be BRAVE, loud and compassionate.

Thank you for your time and your dedication to helping us preserve the basic principles of dignity, equity and freedom and we are hoping we can count on your support to move and implement a reproductive based resolution.