

Testimony in Opposition to Legislative Support of SBHCs

February 23, 2015

Re: Written testimony in opposition to **SB 336, 337, 338, 339** addressed to Committee Chair Monnes Anderson and the Senate Health Committee.

A **School Based Health Center (SBHC)** is a business operating within a school, with a captive audience of children, yet is **not accountable** to the school board, the community or to parents. Oregon SBHC “Standards for Certification” allow medical, mental and reproductive treatment or referrals for children by citing “Minors' Rights” while ignoring “Parents' state and federal legal Rights” to guide the education and health care of their children.

A school board's statutory duty and responsibility to students, parents and the community (ORS 332.072) is usurped when SBHC Standards only require an **annual** report to the “State Program Office” in Salem—**not** to the local school board. A School Based Health Center is also unaccountable when they administer or recommend surveys for students with intrusive and inappropriate questions regarding their personal lives and that of their family (such as the OHA's Oregon Healthy Teens Survey).

Parents are not **accurately** informed of these surveys nor told of their legal right to opt their child out. SBHCs are unaccountable when they give 'scholarships' to students to attend the annual Adolescent Sexuality Conference in Seaside, and do not **accurately** inform parents or the school board about the **content** of this controversial conference. Again, parents' and school board legal rights are ignored. The hearts, minds and bodies of our children are **at risk** when parents and communities are left out of what happens to their children within their schools.

I hope that this committee will vote **NO** on **SB 336, 337, 338, 339** and put any further support or expansion of Oregon School Based Health Centers on hold until parents and communities can be assured that any entity operating within our schools will be held to the highest standards which include parents' legal rights, both state and federal, as well as the statutory and policy rights and responsibilities of local school boards.

The attached pages are attached outlining the lack of full disclosure during the planning and promotion of a new SBHC in Astoria. Additionally, I am including a document from George Sabol Executive Director of Clatsop County Community Action, in which he mentions the absence of parental permission as one of his concerns around the establishment of a SBHC and rescinded his letter of support.

Thank you,
Christine Bridgens
Warrenton, Oregon
503.861.2428

*Attachments

Astoria SBHC - Lack of Full Disclosure

One of the most troubling parts of our Clatsop County journey in opposition to a proposed School Based Health Center (SBHC) to be implemented within Astoria High School was the **persistent lack of full disclosure about services which would be offered or referred at the clinic**. SBHC proponents circulated in the community requesting letters of support from public agencies, but were not fully honest about these services—notably *reproductive health care*. (Letter rescinding support—Clatsop Community Action CEO)

These misrepresentation through omission occurred throughout the entire School Based Health Center planning process:

- Parents were told that medical services could be designed to reflect the 'values of the community'. We later learned that this was **not the truth**. (Oregon School Based Health Center Standards for Certification)
- The community was told that contraceptive services would not be provided at the SBHC, yet these services appeared in the SBHC Committee written report to the Astoria School Board as a top priority medical/reproductive service to be provided to children.
- Parents were told that Planned Parenthood would *absolutely not be any part* of the SBHC, yet students from Astoria High School's Youth Advisory Council (YAC), were recruited (by a Clatsop County volunteer—YAC Facebook) to attend the April Adolescent Sexuality Conference (ASC) in Seaside where they would receive 'Peer Education' training by Planned Parenthood Columbia Willamette/Planned Parenthood Southwest Oregon and then return to Astoria Schools to “educate their peers” and advocate for School Based Health Centers. There was not full disclosure about this recruitment of students to the school administration or to parents. Community members were told that they could not question YAC students when they spoke in support of the SBHC at one of the three community meetings because it would “intimidate them”.
- Parents legal rights (State and Federal) to *guide the education and health care of their children* were never disclosed during any part of the School Based Health Center planning and were not part of the Planning Grant criteria.

I urge you to withhold any further support for the Oregon Health Authority's School Based Health Center planning or continuation until comprehensive, honest disclosure of their operations, including notification of parents' legal rights, becomes part of their Standards of Certification.

Respectfully,
Christine Bridgens
Warrenton, Oregon
Clatsop County



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Mobilizing resources to end poverty

3 May, 2013

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 800 NE Oregon Street, Ste. 805
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Re: School-Based Health Center at Astoria High School

To whom it may concern:

Last year I was asked by another agency director to provide a letter of support on behalf of Clatsop Community Action (CCA). In support of that agency, I submitted the attached letter. **I must respectfully rescind this letter of support.**

At the time I wrote the support letter, I was led to believe the services which would be provided were for basic health care only. Furthermore, I unfortunately assumed parental consent would be part of the requirement to receive services. However, it has recently been brought to my attention by numerous people that the standard policy of a school-based-health-center would be to *not require parental consent for services*. Our agency policy for providing services is that we must have parental consent prior to providing any service for a minor. Therefore, supporting this would contradict our own agency policies.

My comments in the support letter remain accurate. Many students, especially ones from low income families, are experiencing health benefit deficiencies or lack thereof, transportation issues, or simply lack of knowledge to seek these needed services. Over the past four years, our agency's (over 18 and under 25) clientele has increased about 800% due to the adverse economic conditions. Accessible health care has become one of the issues which we routinely address with clients as part of our "helping people meet basic living needs" mission. Providing health care services to students would further their knowledge of available resources, address health and wellness issues with teens, and help create a healthier community.

I apologize for the miscommunication and again respectfully rescind my agency's letter of support.

Sincerely,

George Sabol
 Executive Director

cc: CFHC, CCPH

Our mission is to help people meet housing, food, and other basic living needs.