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Dear Chair Williamson, Co-Chairs Gorsek and Sprenger, and Members of the Committee,

My name is Dr. Jennifer Devoe and I am the Chair of the Oregon Health & Science University's Department of Family Medicine. As family physicians, we work to improve the health of our patients, families, and communities through our clinical care in the clinic and hospital, research, advocacy, and education. We recognize, as witnesses on the front lines of the human experience, the significant impact that access to income, housing, and legal services have on physical and mental health.

We strongly support HB 2631, which will provide legal and auxiliary services to assist women to re-integrate into their communities after incarceration and generate healthier people, families, and communities for all Oregonians.

There are more women behind bars now than in any other part of our country's history. Furthermore, approximately 75% of these women are mothers of minor children. As family physicians, we take care of patients across their entire life span, which includes maternal and pediatric care. We deliver babies and then continue to care for both the mother and baby through their lives. Many of the women leaving prison have myriad inadequately addressed medical issues, lack of access to contraception, difficulty navigating the healthcare system, and an inability to access appropriate health care services. These issues and the repercussions they have on families are inextricably linked with the legal and other socioeconomic factors those women and their families are experiencing as they leave the prison system.

The grant proposed in HB 2631 will enable access to legal services, income, housing, and education for women after incarceration. As we see every day in our work, enhancing these services will help dismantle the structural barriers that inherently exist for these women. When women are incarcerated, in addition to losing access to their health insurance, they may lose custody of a child, take on a significant debt burden, and face housing discrimination. These things not only impact the health of the individual, but of her entire family and her community. We know from the OJRC that access to civil legal services reduces domestic violence rates and family separation and time in foster care for children while encouraging better health through improved access to medical care. Supporting this bill is supporting our community's health.

In 2010, the Rebecca Project for Human Rights through the National Women's Law Center issued a state-by-state report card for conditions of confinement for pregnant women and parenting women. Oregon received a C rating for prenatal care while also highlighting the success of the Coffee Creek Correctional Facility (CCCF) Parenting Inside Out program that has a significant positive impact on factors related to parental stress and depression along with a positive impact on re-arrest and employment rates for parents at six months post-release, thus supporting these women and their transition back into their family upon release. These are positive changes for the women and children impacted by the rising rate of women in prisons, but our C rating shows that we can do better. I support the OHSU physicians of our department who are currently in exploratory conversations with the OJRC in how to work with the pilot legal clinic at CCCF to help women leaving prison understand their medical needs and how to access medical services throughout the state. Working together with the OJRC clinic ensures that when we speak about "access" we are also talking about helping women navigate administrative agencies to minimize legal barriers to accessing health care.

We cannot ignore the inextricable link between the legal and medical needs of incarcerated women. Support of this bill will serve to improve the health and well being of our entire community, while building towards a more equitable and just state for our most vulnerable population. We hope that you will join us in supporting HB 2631. Thank you for your time and consideration.

Sincerely,

Jennifer E. DeVoe, MD, DPhil

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