

House Committee on Judiciary
Testimony of John Devlin
In Support of HB 3035
March 9, 2021

My name is John Devlin. I am a civil rights attorney and a member of the Oregon Trial Lawyers Association, and I am testifying on OTLA's behalf. Over the last decade, I have focused my legal practice on fighting to improve health care for incarcerated people. I support the amended version of HB 3035 because it is an innovative way to improve health outcomes for people in Oregon's prisons.

The Oregon Department of Corrections houses over 14,000 adults in more than a dozen prisons across the state. The ODOC website notes that "[h]ealth care services to inmates must be comparable to health care provided in the community. This means that all types and levels of health care must be provided in a clinically appropriate manner by properly credentialed professionals in settings equipped and designed for the delivery of health care. Health care includes medical, dental, psychiatric, and mental health services." In short, ODOC is operating a large health care system serving thousands of people.

Many of the people who come into the prison system have significant physical and mental health challenges, including substance use disorders, chronic illnesses, and untreated mental health conditions. There is an abundance of literature documenting the impact of prison itself on a person's physical and mental health. According to a 2013 study published in the [American Journal of Public Health](#), one year spent in prison equates to a two-year reduction in a person's life expectancy.

HB 3035 tries to address this problem by requiring ODOC to develop a health assessment that will identify people at moderate or high risk of poor health outcomes. HB 3035 would provide a healthcare navigator from the Oregon Health Authority for anyone who is classified as high risk or moderate risk. That healthcare navigator would help the adult in custody to meet her healthcare needs and would provide continuity of care as the person is being released from custody.

The first healthcare navigation program was developed three decades ago to help reduce disparities in breast cancer care for underserved communities in New York City. Since then, health systems across the country have started to use healthcare navigators to help people access care and improve health outcomes. Here in Oregon, for example, the Oregon Cancer Alliance funds a network of healthcare navigators in the Eugene and Springfield area to help coordinate appointments for patients, address their needs and connect them with resources.

It makes sense to do a pilot program at Coffee Creek, which houses over 1,600 women. There have been many innovative programs at Coffee Creek over the years, including the opening of one of the first Head Start offices co-located in a prison and the nationally recognized LIFE program by Mercy Corps.

HB 3035 also would require ODOC to collect and report data on health outcomes for adults in its custody. This data will allow the Legislature, the Oregon Health Authority, and the public to have more transparent information about ODOC's performance.

Thank you for the opportunity to testify today in support of this important bill.