Dear Chair Holvey and members of the House Committee on Business and Labor,

My name is Kyle Carter and I am writing on behalf of myself, in solidarity with Oregon AFSCME Council 75. I am a former Residential Counselor at a Portland-area behavioral health organization. Residential Counselors work with people who have been diagnosed with severe and persistent mental illness in a transitional home environment. Typically, the people we work with are discharged directly from long-term psychiatric hospital settings to our care. Our position entails medication management and education, assistance with Activities of Daily Living, and skills training. We also are frequently involved in de-escalation when the people we serve are experiencing exacerbated symptoms.

Thank you for the opportunity to share with you why I believe HB 4126 is so important. My involvement with AFSCME began several years ago during a time when I was involved in an organizing drive at my former workplace. I became interested in organizing because I had seen, for many years, how the population that we serve in behavioral health is consistently marginalized in every corner of this country. They are so often among the last to be considered when it comes to funding for services and assistance. And as behavioral health workers, we witness those inequities while also experiencing the injustice of our working conditions, like low wages, inconsistent schedules, and an unsafe work environment.

When we tell people we know about the work that we do, we are often lauded for our selflessness, our compassion. There is not a behavioral health worker I know who has stayed in this field who was not compassionate, who did not care greatly about the people we hope to serve. But the reality is, our work, if laudable, is not valued, not the way that it should be. We are not fairly compensated for our emotional and physical labor, and when that is the case, people don't stick around at a job, not when there are others that pay a living wage. And when talented workers have to leave this field to make a real living elsewhere, when there is that constant turnover, when there are crises in our workplaces that less trained and experienced coworkers are not prepared to handle, it is not merely we behavioral health workers who pay the price. It is our clients. As one of my fellow organizers would say in our meetings: our working conditions are our clients' living conditions.

We need HB 4126 in behavioral healthcare because we deserve the right to organize with our coworkers without fear of reprisal. I cannot begin to list the countless concerns I heard from coworkers about employee and client safety, serious concerns, and there were so many excellent ideas that my coworkers had about how we could address those concerns, ideas about specialized training and client interventions. But when it came time to join an organizing meeting to share those ideas, many were afraid of what the consequences would be if management found out they attended something like that. And their concerns were well founded.

In the end, our union drive did not succeed. There are many reasons for that, and the impact of the COVID 19 pandemic played a significant role. But I have no doubt that if HB 4126 had been around back when we had the momentum, things would have turned out very differently. When management cannot engage in union busting tactics, workers win. With HB 4126, so many of the coworkers that I connected with could have attended organizing meetings,

could have shared their ideas, could have experienced solidarity with their colleagues, without the constant threat of management interference.

Behavioral health workers deserve HB 4126, and our clients do, too. Thank you for your consideration.

In solidarity, Kyle Carter