Loyd Henion's Testimony To: Senate Health Care Committee, Monday, November 6

Chair Patterson, Vice Chair Hayden and Committee members. My name is Loyd Henion, Advocate and Lobbyist for the COFA Alliance National Network.

Today I will be speaking to you both as an American and an honorary Marshallese Citizen. I have been doing advocacy work for the COFA Community for 10 years. Much thanks and credit is due to the advocacy and voices of the COFA Community and the Oregon legislature for getting the COFA community much closer to equal social and economic justice with all other Oregonians.

But today I want to warmly thank Senator Patterson and the Committee for this important informational hearing on the importance of the COFA people and other minority groups for having a safe place to go to when they feel a desperate need to address a pressing issue. That is to say, a 988 system that is adequately prepared to give them the assistance needed when they are seeking help.

Let me go through a few points that I have learned during the last 15 years in which I have had close association with my COFA families that I believe lie at the heart this issue.

Suicide rates being seen since 1960 in Micronesia (the U.S. Trust Territory of the Pacific Islands) have undergone an epidemic-like increase. This phenomenon for generations had been narrowly focused within the 15--30-year male age-group. For some groups this was the number one cause of death for males. These extremely high rates and culturally patterned motives and methods are now characteristic of this group. (Epidemic suicide among Micronesian adolescents. Soc Sci Med. 1983;17(10):657-65. doi: 10.1016/0277-9536(83)90372-6. PMID: 6879228).

Citation: <u>https://www.nytimes.com/1983/03/06/us/micronesia-s-male-suicide-rate-defies-solution.html</u>

- Talking about mental health in the terms of traditional Western belief is not the same for our Micronesian community members. There are different beliefs and sayings for relationship issues for example that make it harder to seek services without stigma in their communities. In conversations with COFA people I have learned that there is not comparable language to describe mental illness or even suicide as a manifestation of profound mental health challenges.
- For the brave individuals who are calling hotlines or seeking services for personal challenges, it is important to understand the history and cultural practices of our Micronesian Oregonians. Often the path to help is hard to navigate due to many barriers that include but not limited to: cultural beliefs around Mental Health and suicide, language spoken and understood, and lack of transportation.
- For these individuals who have called and sought out help, and been denied services, it is hard for them to navigate a way to find any help because of the stigma in their own communities, let alone being brave to stand up and advocate for the needs like I as a white American male have the ability to do today.
- A recent study points out that health care systems in the US must be more nimble and adapt in their approach to delivering MH services, as anxiety and depression within the migrant Micronesian communities is not well

understood. <u>https://www.tandfonline.com/doi/full/10.1080/15313204.2</u> 022.2155347

- The vulnerability of these communities to health issues was particularly clear during the COVID pandemic. The mortality and morbidity in Micronesian migrant communities in Oregon was similar to that of the Native American groups, that is to say severe.
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- Finally, it is also important to acknowledge that LGBTQ community exists within all communities, including the COFA community. Cultural and religious views often stigmatize people who identify as part of the LGBTQ community and compounds barriers that exist to supportive MH services for this subgroup of COFA people. UTOPIA PDX is an example of Islander

community supporting each other with appropriate care, cultural sensitivity and social awareness.

With all this in mind, it is clear that the 988 service is crucial for those brave enough to call for help with mental health issues. With the cultural and language barriers that exist for Micronesians in the US, having somewhere to turn for help is a life-saving service. To hear that language services and cultural intelligence is not working effectively, and worse, that those accessing this service have been hung up on, even unintentionally, is heartbreaking. I hope you can see your way clear to understand why those who actually had this happen are not willing to be here today. It is culturally absolutely wrong. So I am here on their behalf.

Again thank you Senator Patterson, Vice Chair Hayden, and committee members for conducting this very important informational hearing.

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