



February 11, 2020

Dear Rep. Salinas, Vice-Chair Hayden and Members of the Committee:

On behalf of NARAL Pro-Choice Oregon, we respectfully request the committee's support for House Bill 4109. This legislation provides for the public health of all Oregonians, and most importantly, centers the communities most at risk of experiencing adverse health impacts linked to the use of chlorpyrifos—farmworker families and rural Oregonians.

We applaud Representative Alissa Keny-Guyer and other members of this committee work to focus on addressing maternal health outcomes, including the passage of House Bill 4133 (2018) to form the Maternal Mortality and Morbidity Review Committee. The United States has the highest maternal death rate of any developed country, and is the only industrialized country in which the maternal death rate is rising. Moreover, national data shows that the maternal mortality rate is three to four times higher for Black Americans, Native Americans and Alaska Natives, as compared to Caucasian Americans and other populations.

Chlorpyrifos have been shown to cause significant health risks for children, pregnant mothers, farmworkers and rural communities. Studies on pregnant women exposed to chlorpyrifos through home use demonstrated a link between in utero exposure and low birth weights, reduced head circumference of newborns, and pervasive developmental disorders.¹ Overall health and brain function can be permanently and irreversibly harmed by exposure to neurotoxic pesticides such as chlorpyrifos. These problems include reduced IQ, loss of working memory and attention deficit disorder.²

The U.S. Environmental Protection Agency (EPA) recognizes these negative impacts and has banned household use of chlorpyrifos since 2001. For nearly two decades, the EPA has documented the adverse effects of chlorpyrifos on the physical and mental development of infants and children. We commend the work of Oregon employers who are taking additional precautions and reducing their use of chlorpyrifos in the workplace. And yet, many in our state are not able to limit their exposure. Public health policy must protect the health and safety of those who may not otherwise have a choice on how chemicals are used in their environment. The passage of HB 4109 is central to reproductive health equity. We will continue to support policies that protect the health and safety of all our families, regardless of where they work, live or play.

We appreciate the steps this committee has taken towards identifying the social determinants that can cause disparities in maternal and early childhood health outcomes among Oregon communities. We share your commitment to centering public health policy discussion on the populations that are most impacted.

Thank you,

Christel Allen
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¹ Whyatt RM, V Rauh, DB Barr, et al., Prenatal Insecticide Exposures and Birth Weight and Length among an Urban Minority Cohort, *Env. Health Perspect.* 2004, 112(10):1125-32.

² See, Rauh, V., Arunajadai, S. Horton, M. Perera, F., Hoepner, L., Barr, D.B., & Whyatt, R., Seven-year Neurodevelopmental Scores and Prenatal Exposure to Chlorpyrifos, A Common Agricultural Pesticide, *Environmental Health Perspectives*, 119(8), 1196 (2011).