



March 19, 2023

Chair Nosse, Vice-Chairs Goodwin and Nelson, and Members of the Committee

On behalf of the Association of American University Women of Oregon, we express our strong support for House Bill 2002.

The impetus for this law can be found in the US Supreme Court's decision overturning *Roe v Wade* which ruled that the right to an abortion is not Constitutionally protected. As a result of this decision many states have launched a barrage of efforts to pass laws that restrict or completely ban access to reproductive health care services. There is also a disturbing movement to limit or completely ban gender-affirming treatment. While the right to an abortion is protected under Oregon's Constitution, recent history has shown that opponents of access to reproductive rights have vigilantly pursued every potential gap, loophole or crack in these protections. Laudably, House Bill 2002 erects a bulwark against these efforts and forestalls incursions to this much-needed care and treatment.

While the statement "I can't believe we are having to fight this fight again" is on the lips of most Oregonians, and certainly virtually all - if not all - members of AAUW of OR, we cannot let this disbelief impede efforts to ensure that it never has to be said again. An individual's right to make decisions about reproductive health care must be recognized as so fundamental that it simply cannot be denied.

We are also gratified that House Bill 2002 includes a recognition that gender-affirming treatment must be provided to those who need it. Research shows that medical and psychosocial health care designed to affirm individuals' gender identities greatly improves the mental health and overall well-being of gender diverse, transgender and nonbinary children and adolescents.¹ Critically, it also saves lives. Health care plans should not be able to make a special carve-out for treatment that is medically necessary and prescribed in accordance with accepted standards of care.

The provisions in House Bill 2002 that protect health care providers and individuals from malpractice and licensing repercussions should they provide reproductive health care and gender-affirming treatment are astute, as is the creation of the Class A misdemeanor for intentionally, knowingly or recklessly interfering with access to or from a health care facility. These provisions should go a long way to preventing those opposed to this care and treatment from using more circuitous, but no less harmful, methods of thwarting access.

¹ Gender-Affirming Care Saves Lives, Columbia University Department of Psychiatry, March 30, 2022, <https://www.columbiapsychiatry.org/news/gender-affirming-care-saves-lives>.

We gratefully acknowledge the hard work that Speaker Rayfield and the Reproductive Health and Access to Care (RHAC) Work Group have clearly done in ensuring Oregonians have access to reproductive health and the ability to make personal medical decisions. Under the Speaker's leadership, the RHAC Report demonstrates an admirable level of expertise, comprehensiveness and devotion. We genuinely appreciate these efforts and stand with them in support of the legislative product of their labors, HB 2002.

Respectfully Submitted,

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