



Written Testimony in Support of SB 691

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Dear Senator Reynolds and Members of the Senate Committee on Early Childhood and Behavioral Health,

Thank you for the opportunity to provide a written testimony in support of SB 691. My name is Diana Nguyen, and I am a public health graduate student with a commitment to patient advocacy, health equity, and improving access to mental health services. I am also a Mental Health Champion for the Oregon Heals Coalition, an alliance of non-profit and advocacy organizations working together to achieve a robust mental health system in Oregon that is equitable, affordable, culturally responsive, community-centered, and adequately serves those who have historically experienced the least access. This year, the Oregon Heals Coalition built our 2025 Legislative Agenda in partnership with the community. To do so, we recruited 5 Mental Health Champions with backgrounds in the mental health field and determined SB 691 would gain our support as one of our priorities.

According to Oregon's Maternal Mortality and Morbidity Review Committee Biennial Report, untreated substance use disorders and mental health conditions are the current leading cause of preventable maternal death in Oregon.¹ Unfortunately, less than 25% of substance use disorder treatment facilities in Oregon support pregnant or parenting individuals. Research has shown that targeted treatment facilities for pregnant and postpartum women have higher rates of treatment retention and illicit drug abstinence because these programs are more likely to provide integrated medical, behavioral, and social services with a focus on keeping families together.² The integrated care model requires robust collaboration between medical and

¹<https://www.oregon.gov/oha/ph/healthypeoplefamilies/databeports/pages/maternal-mortality-morbidity-review-committee.aspx>

² <https://www.sciencedirect.com/science/article/pii/S0740547219302570>



non-medical systems that often serve as a barrier to care for pregnant people with substance use disorders due to the fragmented health system with siloes of communication.

Thankfully, Oregon has existing programs that address the unmet needs of pregnant people through a comprehensive and equitable approach. Nurture Oregon utilizes an integrated care model that provides pregnant people who use substances with peer recovery support services, prenatal and postpartum care, substance use and mental health treatment, and service coordination. The program focuses on rural areas where quality and timely addiction treatment is scarce. The proposed legislation will aid in expanding the Nurture program and increase access to care for underserved families, leading to improved health and social outcomes for pregnant and postpartum individuals, their infants, and their families.

I urge you to **vote “YES” on SB 691** to expand statewide proactive and preventative addiction treatment programs, increase substance use disorder treatment availability for pregnant people, and reduce barriers in the healthcare system.

Thank you for considering my testimony,

Diana Nguyen

The Oregon Heals Coalition

