

TESTIMONY IN SUPPORT OF SB1167 – MOMNIBUS "1st Thousand Days"

Honorable Senators and Staff,

My name is Dr. Jessica Beeghly, and I am an Assistant Professor of Obstetrics and Gynecology and a licensed psychologist at OHSU where I work in the Reproductive Psychiatry Division and co-facilitate the Perinatal Trauma Clinic. I am writing to express my full support for SB1167, which proposes to allocate critical funding and resources to support families and ensure the healthy development of children in Oregon during the crucial first 1,000 days of life. This bill provides vital funding through the Oregon Department of Administrative Services (DAS) for distribution to seven key entities across the state. These investments will strengthen early childhood development, maternal health, and family support programs, addressing disparities and ensuring equitable access to care. SB1167 supports the development of a **birthing village and critical care services for getting the right start for families where care deserts exist**. These investments are essential for improving maternal and infant health outcomes, reducing disparities, and ensuring families receive the support they need. As a perinatal mental health provider, I have seen firsthand how critical these resources are in shaping the health and well-being of Oregon's children and families.

As a psychologist focused on working with patients with perinatal mood and anxiety disorders (PMADS) I have seen that one of the most common underlying factors in perinatal mood and anxiety disorders, is limited social support. New parents are given the message that everything involved in caring for a new baby is on their shoulders, which leads to significant stress, depression, guilt, fatigue, and overwhelm. My patients feel isolated in these experiences and are put in positions of having to navigate care for a new baby in the midst of dealing with difficult mental health symptoms. As a perinatal mental health provider my ability to support my patients with PMADS is often impacted by the limited resources and lack of holistic support structures that exist for my patients. Mental health symptoms do not occur in a vacuum. Any legislation that increases support and resources for the perinatal population would go a long way towards helping to support the mental health needs of this population. This is particularly true in regards to historically marginalized populations where limited resources and lack of necessary systemic support have led to significant disparities in access to necessary care. As a bilingual clinician who has long worked in Spanish with the Latinx community I have seen first hand the disparities in care experienced by this population, from difficulties accessing care to limited resources. This unfortunately is not an experience unique to the Latinx community but an experience shared across BIPOC populations, particularly here in Oregon.

Funding for the first 1,000 days of a child's life (from conception to age two) is crucial because it's a critical period for brain development, laying the foundation for lifelong health and well-being, and addressing issues like malnutrition and poverty. Parent/infant attachment has been the primary focus of my research and I can attest that the first 1,000 days of a child's life are crucial for facilitating the growth of a secure attachment relationship between parents and their children. Attachment dynamics have been found to have a significant impact on a child's emotional and

cognitive development and lay the foundation of learning emotion regulation and how a child perceives themselves and others.

Lastly, studies show that countries that fail to invest in the well-being of women and children in the first 1,000 days lose billions of dollars to lower economic productivity and higher health costs. It is why several of the world's leading economists have called for greater investments in the nutrition and well-being of mothers, babies, and toddlers as a way to create brighter and more prosperous futures for us all.

I urge you to support SB1167 and make this investment in our state's future. Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink that reads "Jessica Beeghly, Ph.D., PMH-C". The script is fluid and cursive, with the letters "J", "B", and "P" being particularly large and stylized.

Jessica Beeghly, Ph.D., PMH-C
Assistant Professor
Department of Obstetrics and Gynecology-Reproductive Psychiatry Division
Oregon Health & Science University (OHSU)