

SENATE COMMITTEE ON HUMAN RESOURCES

Friday February 1, 1991 Hearing Room A 3 p.m. Tapes 15- 16
MEMBERS PRESENT: Sen. Bill McCoy, Chair Sen. Cliff Trow, Vice-Chair
Sen. Shirley Gold Sen. Paul Phillips MEMBER EXCUSED: Sen. Bill
Kennemer VISITING MEMBER: Rep. David McTeague, District 13 STAFF
PRESENT: Janice J. Fiegener, Committee Administrator Mike Meriwether,
Researcher Michael Sims, Committee Assistant Andra Woodrum, Page

AGENDA: House Bill 3114 (1989) Task Force on Adolescent Pregnancy and
Parenthood

These minutes contain materials which paraphrase and/or summarize
statements made during this session. Only text enclosed in quotation
marks report a speaker's exact words. For complete contents of the
proceedings, please refer to the tapes.

TAPE 15, SIDE A 001 CHAIR McCOY: Calls the meeting to order at 3:04
p.m.

REPORT FROM HB 3114 TASK FORCE ON ADOLESCENT PREGNANCY & PARENTHOOD.

WITNESSES: -Mike Balter, Chair, HB 3114 Task Force -Grant Higginson,
Medical Consultant, Office of Health Services, Oregon Health Division.
-Diane Turner, Member, HB 3114 Committee -Rep. David McTeague, Chief
Sponsor, HB 3114, 1989 Legislative Session -Mary Bromel, Member, HB 3114
Committee -Sue Cameron, Member, HB 3114 Committee -Kevin Concannon,
Director, Department of Human Resources -Allie Stickney, Executive
Director, Planned Parenthood of Oregon

005 MIKE BAITER, CHAIR, HB 3114 TASK FORCE ON ADOLESCENT PREGNANCY
AND PARENTHOOD (EXHIBITS A, A-1): Details Exhibits A and A-1.

047 GRANT HIGGINSON, MEDICAL CONSULTANT, OFFICE OF HEALTH SERVICES,
OREGON HEALTH DIVISION (EXHIBITS B, B-1): Details Exhibits B and B-1.
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128 SEN. TROW: Are those (abortion statistics from Exhibit B-1) in tune
with national figures?

129 HIGGINSON: I'm not in tune with what happens nationally but assume
that they are fairly consistent.

-Continues testimony.

208 DIANE TURNER, MEMBER, HB 3114 COMMITTEE ON ADOLESCENT PREGNANCY
AND PARENTHOOD (EXHIBIT A-1): Details committee recommendations on pages
28-48 of Exhibit A-1. 279 REP. DAVID McTEAGUE, CHIEF SPONSOR, HB
3114, 1989 LEGISLATIVE SESSION (EXHIBIT A-1): Continues to detail
recommendations on pages 28-48 of Exhibit A. 365 SEN. PHILLIPS: Did
you find any groups that hindered your progress, or was cooperation
universal? 377 REP. McTEAGUE: Yes. We had good cooperation from the
departments of Education and Human Resources, and those who were
requested by statute to be on the task force. We had broad-based help
from agency staff, advocacy groups, members of the Legislature, etc.
This was a very good way to attack issues and come up with set of
recommendations. I think the product speaks for itself. 400 MARY
BROMEL, MEMBER, HB 3114 COMMITTEE (EXHIBIT A-1): Details recommendations
for education on pages 48-50. 439 SEN. TROW: In some states, schools
make provisions to care for children on-site. How about here?

443 BROMEL: In terms of school-based day-care centers? 444 SEN. TROW: In terms of kids coming to school, and they bring their children along, and child care is provided. 448 BROMEL: There are a variety of models. North Tallhurst, a program of the Multnomah Education Service District, has a school-based day-care center, staffed largely by students who use the school. There is a child-development specialist who staffs the center. And there is cost involved in providing the care. 457 SEN. TROW: Are they trying to figure out if young women are getting both the child care and the education at the same time? 464: BROMEL: They are required to take several periods of their school day to rotate through the day care center. But they are getting some education, and there are different models. Beaverton has a voluntarily-run day-care center. 470 SEN. TROW: Can't the 55 young women that were not able to access day care, as referred to in the previous testimony, get into any of these programs?

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TAPE 16, SIDE A 018 BROMEL: No, because they are dealing with a volume issue. They currently have 60 day-care slots that are full, in addition to young women presently in those slots.

022 SEN. TROW: Is it a matter of money? If they had the money, could they be in the system?

023 BROMEL: Yes. There are community resources for their use, but these resources do require payment. Home-based day-care facilities need the money; school-based day care facilities are paid by grant funds. They're able to accommodate many, but there are those they can't help.

029 BAITER: Sometimes day-care payment is made directly to the teen mother; other times, there is a special grant set-up. But it's limited by capacity and can only provide care for however many slots they have available. The funds are fragmented, the money is coming from different organizations - Student Retention Initiative money and other sources - but no source is very stable. Programs open and close from year to year.

036 BROMEL: The exception is the Adult and Family Services money that's available for their clients. -Continues summarizing educational recommendations from Exhibit A-1, pages 485 0.

077 SUE CAMERON, MEMBER, HB 3114 COMMITTEE / DIRECTOR, TILLAMOOK COUNTY HEALTH DEPARTMENT (EXHIBIT A-1): Details family-planning recommendations on pages 32-34 of Exhibit A-1. -For example, at the local level, Tillamook County appropriates \$13,000 a year for family planning programs. A nurse-practitioner comes from Astoria 3 days a month, which is not very much, when you take into consideration the numbers of sexually-active teens in the county. We surveyed about 1,000 kids in the county's 3 high schools about 3 years ago. We found that approximately 600 were sexually active, and 33 % were using birth control - there is evidence of a big gap between sexually-active kids and those using birth control. Specifically, we found 400 kids sexually active with no birth control and 198 practicing birth-control methods. With that \$13,000 in Tillamook County's family-planning budget, we see 125 teens. Family planning for our county's young people is limited. There is a 4- to 6-week waiting list, which is too long a period for these kids to wait. I encourage the Committee to support Governor Roberts' budget proposal allocating \$1 million for family planning, which would enhance the ability to provide services to teens. -Continues detailing Exhibit A-1. 113 SEN. TROW: Can this be achieved at the

local level, working with school boards? at the local level, working with school boards? 115 CAMERON: I believe it would be difficult for this to be accomplished, based on prior 115 CAMERON: I believe it would be difficult for this to be accomplished, based on prior experience. We have been trying, unsuccessfully, to get school nurses in Tillamook County's schools. Senate Committee on Human Resources February 1, 1991- P - e 4

118 SEN. TROW: What mandates are needed to get clinics available?

119 CAMERON: We want to try to expand capacity for teens. We have a teen clinic established in the county health-clinic at the courthouse in Tillamook, but would like to see an on-site clinic at the high school. In order to expand, they would need to do outreach as well, to provide more accessibility than 3 days a month. 126 SEN TROW: Is the recommendation for family-planning clinics to be put in schools?

127 CAMERON: It is to increase funding for family planning in every county, to be used in whatever appropriate method.

129 BALTER: There is a recommendation that the schools expand the model of teen healthclinics in the schools. But this is a separate one, making health-department family planning services more accessible. In summary: The HB 3114 Task Force finished its work just as Measure 5 passed. We tried to look at resources and determine what could be done without challenging or coming up against the Measure 5 problem. -Details legislative recommendations in Exhibit A.

168 SEN. McCOY: What, other than the \$1 million, did the transition team approve?

170 BALTER: The staff in the Health Division's Prevention Unit is proposed to be smaller than in the past.

176 SEN. PHILLIPS: I see an interesting paradox here. In the last 4 or 6 years, teen pregnancy has increased. At the same time, there has been a decrease in funding, either statewide or at least in Tillamook County. Also, AIDS education has increased. One would think a greater part of society would be better educated, but there is no evidence that this has carried over to a part of society that needs it. Do you have any theories about this?

194 BALTER: With regard to education, the sexual propaganda in the media and on television is a factor. The amount of TV time dedicated to AIDS education, as opposed to sexual themes (sexual activity or innuendo), is a drop in the bucket. 204 SEN. PHILLIPS: We're educating those who respond but not necessarily getting to those we want to educate?

207 BROMEL: Yes, and teens of ten don't believe they are vulnerable.

212 SEN. PHILLIPS: In time of financial crisis, it seems inappropriate to be asking for money when the money is being eliminated - that seemed to be the gist of what you said. Is it more the money is being eliminated - that seemed to be the gist of what you said. Is it more accurate that you are trying to save us \$69 million later? We're spending \$6 million that might better be reduced out of a \$69 million fund of money?

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223 HIGGINSON: I'm glad you observed that instead of having to point it

out. It is a pay-now or paylater situation later situation no matter how you look at it. In this situation, the investment in this case will be a benefit at different levels. There is a great deal of disagreement in the public about what to do about this situation. Dealing with this problem in only one way probably won't work; need to look at this problem from different angles. They have about 6 good models right now for pregnancy prevention/reduction and reduction of consequences.

248 SEN PHILLIPS: It's important to deal with the appropriate agency and interagency politics. How much of the at-risk population now has access to family-planning education?

260 CAMERON: I have no statewide statistics, but 125 teens in Tillamook County used our familyplanning services last year.

265 HIGGINSON: About 1/3 of the teens who need services could get them. Others are on waiting lists, or no services are available to them. Page 32 of the report (Exhibit A-1) has the figures.

273 CAMERON: This is something we all should know and that's why we'd like to see this council remain in a leadership role. We keep having questions like this and we don't have ways of accessing the information.

283 JANICE J. FIEGENER, COMMITTEE ADMINISITRATOR: I have a question regarding the language in the Federal Child Care Block Grant that says federal funds can supplement but not supplant state programs. Are we going to run afoul of those regulations in terms of the teenpregnancy program? 290 KEVIN CONCANNON, DIRECTOR, DEPARTMENT OF HUMAN RESOURCES: The regulations that relate to this grant won't be promulgated until May. There is a great deal of interest on issue of supplantation in state budgets nationwide. Their early interpretation of congressional intent on the supplantation question is based not only on state dollars in childcare but on child-care dollars beyond those appropriated by state general-funds. We feel that we will be able to meet that test of matching funds. We are encouraging that during the hearing process, targeting process be used from outset as opposed to a blank tablet which allows process to define where and how money will be used. We are already aware of certain target groups, such as migrant children.

327 SEN. TROW: The report calls for creation of an Office of Adolescent Pregnancy and Parenthood. Do you think that such an office should be established and would it be directed by a lead agency such as yours?

333 CONCANNON: I strongly agree with this proposal. There was a substantial dialogue with this commission when it was formulating its recommendations.

335 SEN. TROW: Is that in the budget now?

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336 CONCANNON: No, it is a post-Measure 5 (if not pre-5) victim.

Regarding the location of such an office; it would be housed temporarily in the DHR director's office with the expectation that after the 1991-93 biennium, it would become more independent. This way the cost would be limited. If funds aren't there to create an office, then they would like to find some way of more formally recognizing the council. 349 SEN. TROW: Do you see that you might move that way, without funding for an office right away?

353 CONCANNON: I feel this is a legislative call, but if the Legislature moves in that direction, we would support what we could, in order to show recognition because of the importance of it. 360 SEN. TROW: Are other states focusing on this problem with an agency now?

361 CONCANNON: States are recognizing the urgency of the problem and the possibility that if nothing is done now, it is worse later, with problems of child abuse, etc. 367 BAITER: Another aspect noted is that the benefit of this being a legislatively-appointed task force as opposed to one appointed by a department head, gives it much more cross-agency discipline and authority, along with the ability to come back to the Legislature and report on the dynamics of the problem. In closing, I ask that the committee address problems regarding the victims of teen pregnancy. We're looking at an alternative revenue source now in use in Florida, where they've taken on this same type of project and have encountered the same type of fiscal problems as Oregon, and have looked at an alternative tax. We are looking into this project and we may be coming back to present these findings to you. We will be exploring the Florida idea and will come back with a proposed tax or fee on health-club memberships or other things, to generate revenues for teenpregnancy programs.

410 ALLIE STICKNEY, EXECUTIVE DIRECTOR, PLANNED PARENTHOOD OF THE COLUMBIA/WILLAMETTE (EXHIBIT C): Presents recommendations of HB 3114 committee, as detailed in Exhibit C. TAPE 15, SIDE B

062 LAURA CHENET LEONARD, PRESIDENT, FAMILY PLANNING ADVOCATES OF OREGON (EXHIBIT D): Details Exhibit D. 117 SEN. PHILLIPS: Referring back to funding that was cut for school-based health clinics - what has been cut from these programs?

120 LEONARD: It's our understanding that the Oregon Health Division and Multnomah County may need to eliminate funding for school-based clinics. We would like the issue reexamined as part of alleviating teen pregnancy. 129 SEN. PHILLIPS: Would you like to see a state-wide funding source for school-based clinics. Please clarify. Senate Com~nittee on Human Resources February 1, 1991 - Page 7

132 LEONARD: If and when the school-based funding issue is presented to you as a committee, we -would ask for your consideration based on this testimony today.

136 CHAIR McCOY: Would you consider a statewide or nationwide health plan as a model, instead of funding for each individual group (i.e. teens, parents) - rather, all groups together? Places where health plans have educational programs, physical examinations, checkups for people older than 45, etc. Could this be the ideal plan? 153 LEONARD: Some industrialized countries have examined and accepted the fact of sexuallyactive teens in their societies. They deal with that fact in determining their healthcare systems. Sexually-active teenagers who seek birth control are seen as responsible persons, not viewed in a negative light. 169 CHAIR McCOY: Adjourns meeting at 4:19 p.m.

Submitted by: Reviewed by:

Michael Sims Janice J. Fiegenger Assistant Administrator

EXHIBIT LOG:

A - HB 3114 Committee recommendations - Michael Balter - 2 pages
A-1- HB 3114 final report - HB 3114 committee - 60 pages A-2-HB
3114 report/executive summary - HB 3114 committee - 6 pages B -Trends
and costs of adolescent pregnancy/parenthood - Grant Higginson - 5 pages
B-1- Teen-pregnancy rates - Grant Higginson - 3 pages C -Testimony on HB
3114 Committee report - Allie Stickney - 5 pages D - Testimony on HB
3114 Committee report - Laura Chenet Leonard - 4 pages E - Position
paper on child care - Teen Pregnancy Task Force - 3 pages F - Teen
Pregnancy and Too-Early Childbearing: Public Costs, Personal
Consequences - Teen Pregnancy Task Force - 50 pages

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