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TESTIMONY ON LD 979 AN ACT TO EXPAND MAINE'S SCHOOL-BASED HEALTH CENTERS PRESENTED BY MAINE FAMILY PLANNING TO JOINT STANDING COMMITTEE ON HEALTH AND HUMAN SERVICES APRIL 6, 2021

Senator Claxton, Representative Meyer, members of the Joint Standing Committee on Health and Human Services, my name is Laura Harper and I am presenting testimony on behalf of Maine Family Planning in support of LD 979, An Act to Expand Maine's School-based Health Centers (SBHCs).

For 50 years, Maine Family Planning (MFP) has served as Maine's statewide, nonprofit agency responsible for organizing and accounting for Maine's statewide network of sexual and reproductive health services. At present, Maine Family Planning operates 18 sites directly and subcontracts with established health care organizations to provide sexual and reproductive health services in regions of the state MFP does not currently serve, including Planned Parenthood of Northern New England, Federally Qualified Health Centers and School-based Health Centers. Altogether, Maine's sexual and reproductive health network consists of 56 sites and serves roughly 28,000 Mainers annually.

MFP currently subcontracts with <u>6</u> School-based Health Centers, including centers located at Maranacook High School, Calais High School, Portland High School, Deering High School and Casco Bay High School. The sixth School-based Health Center, at Westbrook High School, just recently joined MFP's sexual and reproductive health care network.

During fiscal year 2019, prior to the pandemic, these school based health centers provided sexual and reproductive health care services to 244 unduplicated students. During the same year, 581visits were paid to these health centers by students. The range of services includes but is not limited to: sexually transmitted infection testing, diagnosis and treatment; pregnancy testing; birth control counseling; and the provision of a range of contraceptives.

Demographically, the patients utilizing services supported by Maine Family Planning reflect the communities where SBHCs are located: in Southern Maine: 31 percent of the patients served were White; 61 percent Black; 5 percent Asian; 12 percent Pacific Islander; and 1 percent Native American. In Northern and Eastern Maine, 97 percent of the patients served were White; 1 percent Black; 1 percent Asian; and 1 percent Native American.

The benefits of providing these and other services through School-based Health Centers are well-documented, self-evident and deserve to be expanded. SBHCs exponentially increase access to critical sexual and reproductive health care services in a confidential setting made available by trusted providers. SBHCs reduce time away from school once students are able to return to in-person learning. And SBHCs are a benefit to working parents, reducing the time needed away from work to take their children to medical appointments.

Having worked with School-Based Health Centers for more than 15 years, Maine Family Planning wholeheartedly supports LD 979 and urges members of the Joint Standing Committee on Health and Human Services to vote: Ought to Pass.

Sincerely,

George Hill, CEO/President