We try and we learn. That phrase is one of the most important values at Planned Parenthood of Montana (PPMT). It defines the work we do, and boy, have we leaned into it a lot in 2020! Alongside all of you, we have faced issues in 2020 that we’ve never known before. Together, we are navigating a pandemic, with a viral foe previously unknown in the world.

When the novel coronavirus started its spread toward Montana, we rallied to hold our doors open for our patients. We know our patients rely on us — and we had to be there for them.

Our staff at all of our locations turned their focus to compassionate care with minimized contact. They learned new policies, protocols, and procedures designed to avoid spreading COVID-19 between patients and staff. They shifted gears at a rapid pace to offer the same extraordinary care, via the phone and internet through expanded telehealth options.

All of you who stand with Planned Parenthood of Montana have offered strength these past few months through your expressions of concern, your calls, financial support and even surprise cookie deliveries. Without our passionate supporters across the state of Montana, these days and weeks would have felt much heavier.

We are uplifted in the work we do by the response we’ve received from those who turn to PPMT for health care.

Because you care, we can care for our patients. No matter what. Thank you!
Dear Friends,

In early March I travelled to New York City to meet with a small group of other Planned Parenthood CEOs and national office staff. We sat in a conference room for two days talking about all of the ways that access to abortion care might change in 2020. We spent much of our time thinking about the Supreme Court, what it would look like for patients to have to travel great distances to receive care, and how a patchwork of regulations across the country might impact people in need of abortion care. On the way home I spent most of the flight fretting about how the Court might rule on June Medical Services v Russo in early summer, while half listening to a fellow passenger talk about having to leave her study abroad program in Italy because of quarantine there. I didn’t see a connection between those two things, but I soon would.

Just a week after my return Montana had its first positive COVID-19 diagnosis. Within two weeks we were learning about states, such as Ohio and Texas, politicizing the virus to deny people access to abortion. Abortion was being declared “a non-essential” service. The two things occupying my mind on my flight had come together.

People still have sex. They still need birth control, STI testing and treatment, and safe, legal abortion. While access to abortion was not politicized in Montana, PPMT still had to determine how we could provide our essential services to our patients.

Our front-line staff, those who have always provided care and support for the people we serve, jumped in. They have pivoted to telemedicine, changed how we schedule, screened every patient over the phone and upon arrival for care for symptoms, helped patients decide if an office visit was essential for them, donned masks and face shields, traveled to other locations to pitch in, and changed procedures with every new piece of COVID-related science.

After four months of life in this new world it was easy to forget that the Supreme Court was still preparing to issue a ruling on an important case for abortion access: June Medical Services v. Russo. On June 29, the court issued a 5–4 ruling: the state of Louisiana could not require abortion providers to have admitting privileges. What an enormous relief.

The fight to protect access to sexual and reproductive health care isn’t over. There will be more laws passed, more court cases. We also know that the novel coronavirus crisis is far from over. But we celebrate a major victory for our patients’ essential needs in the courts, and we celebrate the everyday victories that mean patients get essential care in this pandemic.

Onward,

Martha Stahl, President and CEO
**Advocacy**

**A TALE OF TWO DECISIONS: SCOTUS AND THE FIGHT FOR REPRODUCTIVE RIGHTS**

Nearly everyone who watches the news, cares about reproductive health, or is fighting the good fight for racial and gender equity knows by now that we saw a win and a loss from the Supreme Court of the United States (SCOTUS) in July.

We heard a collective cheer when SCOTUS decided in favor of reproductive health in *June Medical Services v Russo*. At issue was a medically unnecessary abortion law that required admitting privileges at local hospitals for Louisiana’s abortion providers. If the law were upheld the state would have been left with only one abortion provider. The Supreme Court had very recently struck down an identical Texas law in *Whole Woman’s Health v Hellerstedt* (2016), finding it imposed an “undue burden” on patients seeking abortion. For that reason, the SCOTUS decision to strike down the law is a significant victory for reproductive health and rights.

Within days of this decision we faced collective dismay when the Supreme Court ruled on *Trump v Pennsylvania*, upholding the Trump administration rules allowing employers and universities to push their religious or moral beliefs on employees and students by denying them access to insurance that covers birth control.

The Affordable Care Act’s birth control benefit expanded contraceptive coverage with no out-of-pocket costs for 62 million women. This loss of access to critical, time-sensitive care won’t hit everyone in the same way – disproportionately impacting Black, Indigenous and Latinx communities. Access to birth control is inextricably linked to economic stability and advancement, and is a potent tool in the fight to advance race and gender equity.

The decision is wrong. Rest assured, we’re ready to fight this fight! It is imperative that we expand access to health care, not take it away. Everyone should have the right to control their own bodies and make decisions for themselves, no matter where they work, go to school, how much money they make, or the color of their skin.

**Education**

**VIRTUAL EDUCATION**

Who would have thought sexuality education could become a virtual experience? Prior to COVID-19, the Education and Training team had a full calendar of spring and summer events. Team members, who typically interact directly with community members, are adjusting and adapting. In-person events such as Teen Council meetings and professional trainings stopped in March and the online shift began.

Their first endeavor was to transition Teen Council to virtual learning, starting with video conferencing new member interviews and celebrations for graduating members. In May, Teen Council created and hosted “Are You Smarter than A Teen Council Member,” a Zoom education competition between parents and teens. To help keep our youth safe, healthy, and fully engaged, this year’s Teen Council will kick off the 2020–2021 school year in August with an online version of their annual retreat.

The more we learn about virtual education, the more opportunities we see for other programs. In September we will offer youth-serving professionals an online version of *Foundations: Core Skills for Sex Ed Training*. We will also make live and recorded presentations for schools, communities, and partners. PPMT’s annual *Sexual Assault Nurse Examiner Training* (SANE) will also move online, in partnership with the International Association of Forensic Nursing. Community outreach and engagement in Indigenous communities has all moved online and is critical in helping build our curriculum development project. Said project is funded by the Steele-Reese Foundation and PacificSource Foundation for Health Improvement.

While everyone in the Education and Training division misses the face-to-face and in-person interactions of traditional programs, they are excited to offer education and training opportunities in a safe and healthy manner. Their commitment to high quality, accurate educational programs hasn’t diminished. The silver lining of COVID-19 for this team is that it inspired creative ideas to find new ways to achieve important outcomes.

Learn more about Teen Council and other PPMT education programs at: [www.plannedparenthood.org/planned-parenthood-montana/local-education-training](http://www.plannedparenthood.org/planned-parenthood-montana/local-education-training).
## PPMT Health Centers

You asked and we answered! We expanded hours in Helena and Great Falls to accommodate our patients’ needs.

<table>
<thead>
<tr>
<th>Location</th>
<th>Address</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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<tbody>
<tr>
<td>Billings West</td>
<td>1844 Broadwater #4</td>
<td></td>
<td>8 am – 5 pm</td>
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<tr>
<td></td>
<td>(406) 656.9980</td>
<td>closed</td>
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<tr>
<td>Helena</td>
<td>1500 Cannon Street</td>
<td>9 am – 6 pm</td>
<td>9 am – 6 pm</td>
<td>11 am – 7 pm</td>
<td>9 am – 6 pm</td>
<td>9 am – 6 pm</td>
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<tr>
<td>Billings Heights</td>
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<td>Closed</td>
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<td>Closed</td>
</tr>
<tr>
<td>Missoula</td>
<td>219 E. Main Street</td>
<td>9:30 am – 4:30 pm</td>
<td>9:30 am – 4:30 pm</td>
<td>9:30 am – 4:30 pm</td>
<td>9:30 am – 4:30 pm</td>
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<tr>
<td>Great Falls</td>
<td>211 9th Street South</td>
<td>9 am – 5:30 pm</td>
<td>9 am – 5:30 pm</td>
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<td></td>
<td>(406) 454.3431</td>
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### Billings Administration

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<tr>
<th></th>
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<th>Monday – Friday only</th>
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<tbody>
<tr>
<td></td>
<td>(406) 248.3636</td>
<td>(406) 248.3636</td>
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### LET US PAY YOU A (VIRTUAL) HOUSE CALL

**Telehealth.** Everyone’s talking about it, and we hope you’ll try it! PPMT’s Telehealth team offers live, private health care visits from the comfort and safety of your home. It’s easy! Schedule your appointment today. All you need is an electronic device (computer, phone, tablet) capable of video conferencing. Follow these steps and let us know how it goes.

Visit the PPMT website via: plannedparenthood.org/montana or https://bit.ly/ppmtcare. Select “make an appointment.” Choose a health center and then “book online” and follow the steps to make your telehealth appointment. You may also schedule a telehealth visit by phone: health center numbers, locations and hours can be found above. Be ready to provide your reason for visiting, any symptoms you may have, and a date and time that work well for you.

On your appointment day you will be called by a clinic assistant (CA) who will complete a health history, update your contact and insurance information, and review costs associated with the visit. The CA will send you a link via text or e-mail which allows you to enter the virtual waiting room. Your provider will then join your virtual appointment and provide your health care services. If your appointment requires follow-up care of any kind, it will be covered in-depth while you are still in your virtual visit.

That’s it! Safe and convenient. Give it a try and then let us know what you think.

> “With most everything being shut down due to COVID-19, I was nervous I wouldn’t be able to get tested for STIs. The quality of care was awesome, the process was easier than anticipated, and the fact that this is offered right now during the pandemic is huge.” — KyLeigh, MT