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**AT STAKE:
*ROE V. WADE***



The Voice

Mt. Baker Planned Parenthood

Summer 2021



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"ANNUAL EXAM"

MBPP Annual Report

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**PROTECTING
PREGNANT
PATIENTS**





Letter from CEO, Linda McCarthy

Abortion rights are under attack in America. *THIS IS NOT A DRILL!*

If you have been following the news, you know that the U.S. Supreme Court (SCOTUS), with their conservative majority, has agreed to hear a case that many believe will gut *Roe v. Wade*. I have to say, I am worried.

The issue at hand is a 15-week abortion ban passed in Mississippi in 2018 but challenged by the Jackson Women's Health Organization, the sole abortion provider in that state. Applying *Roe v. Wade* and nearly 50 years of precedent, a federal district court struck down the ban as unconstitutional, and the Fifth Circuit Court of Appeals (not known for progressive decisions) affirmed that decision. Last year, Mississippi asked the Supreme Court to review the Fifth Circuit's decision and the Court has now granted that request, agreeing to address the question of "whether all pre-viability prohibitions on elective abortions are unconstitutional".

States that oppose abortion have passed "trigger" laws that are designed to be implemented immediately if SCOTUS overturns *Roe* and allows restriction pre-viability. 23 states (14 states and D.C., including Washington, thankfully, have laws that protect the right to abortion) would make abortion virtually unavailable over-night if *Roe* falls, leaving millions of women in abortion deserts across America.

In Texas, we have watched as a novel anti-abortion tactic of having voters approve an ordinance declaring the City of Lubbock as a "sanctuary city for the unborn", banned abortion within the city limits, even for rape and incest victims. The next closest provider is now 300 miles away! What makes this approach so novel, is that rather than relying on the government to enforce the ban, the Lubbock ordinance allows private citizens ("the unborn child's mother, father, grandparents, siblings and half-siblings" to sue for damages someone who helps others access an abortion) to file lawsuits against not only abortion providers but also anyone who assists another person in seeking abortion services! A lawsuit to block this voter-approved abortion ban was dismissed by a federal district judge who stated that Planned Parenthood did not have standing to sue the city, so as of June 1st, this ordinance took effect, virtually blocking all abortions except for medical emergencies.

*In the past 48 years, the stakes have truly never been higher, and it remains to be seen whether in a short year from now, SCOTUS will overturn *Roe v. Wade*. I repeat, this is NOT A DRILL!*

A handwritten signature in black ink that reads "Linda McCarthy". The signature is written in a cursive, flowing style.

*If you would like to dialogue about this article, please contact me at:
lmccarthy@mbpp.org*

MBPP Mission

To ensure every individual has the knowledge, opportunity, and freedom to advance their sexual and reproductive health.

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On September 1, 2021, Texas may become the first state in the country to ban abortion at six weeks, which is before most people even realize they are pregnant or have missed a period. This new ban would make no exception for pregnancies resulting from rape or incest.

In a novel twist, this ban also includes a first-of-its-kind, private-cause-of-action provision that allows anyone from any state to sue an abortion provider and other individuals who help or intend to help a patient obtain care, regardless of whether they have harmed the patient and even if they are not directly involved in the situation. It would be one of the most extreme abortion bans in the country.

In practice, anyone – including someone who does not know the person who had an abortion – could sue the doctor who provided the procedure, as well as the nurses and clinic staff. Civil liability would also extend to people who provide logistical or emotional support to a person who gets an abortion, including family members, clergy, and rape crisis counselors. The law also would hold people liable if they merely intend to help a person seeking an abortion after six weeks, if that abortion takes place in the state of Texas.

This is the first bill passed that would create a “private-cause-of-action” for the exclusive enforcement of an abortion ban. This is a new tactic by abortion opponents designed to make it harder for abortion providers to challenge the ban in court because enforcement is left up to private citizens instead of the state, circumventing the judiciary.

This is an historic year for attacks on abortion at the state level, with over 500 abortion restrictions having been introduced in 2021 and over 60 of those have already been passed and signed into law. Across America (but thankfully, not in Washington State), the threat to the right to privacy and self-determination has never been under more attack in the past 48 years than it is today. We repeat, this is NOT a drill!

IF ROE WERE OVERTURNED:

23 states

would likely outlaw abortion.

41% of women

of childbearing age would see their nearest abortion provider close.

300 miles

would be the average distance patients would have to travel to reach an abortion provider.

And who would this hurt the most?

People who can't afford to travel, arrange child care, or leave work for the trip.

Sex Education During a Pandemic

The pandemic brought significant challenges to MBPP's education programs as our Community Health Educators worked to navigate remote learning: "How can we deliver sex education at a time when schools are closed?", "How can we deliver programming to schools in an online setting?", and "What does it look like to transition back to in-person teaching?" Sex education is a tricky, nuanced topic to teach in the most normal of times, let alone online during a pandemic. Through a bit of innovation, trial and error, and creativity, we successfully worked to adapt our programming to be digitally accessible to our community.

In the Spring of 2020, we worked with our peer-led sex ed Teen Council program to develop YouTube videos of their *Protection, Consent, and Gender Identity & Sexual Orientation* lessons to be used by high school health teachers during the initial shutdowns. Later, we adapted these lessons to be taught live through videoconferencing. Through the fall, we worked with new Teen Council members to train them to facilitate sex ed over Zoom. This included training to maintain "eye contact" with computer cameras, encouraging participants to utilize the chat box or unmute microphones to ask and answer questions, and to sit in what feels like a very long silence after a question is posed to the students. By the end of the 2020-2021 school year, our Teen Councils delivered 102 of these lessons over Zoom to 61 classes.

Teen Council also had to pivot for Teen Lobby Day this year. Our teens met with legislators from the 10th, 39th, 40th, and 42nd district over Zoom to ask for funding for family planning services and to thank those Senators and Representatives who were supportive of passing mandatory comprehensive sex education the year prior.

Another major hurdle was the transition of 5th grade *Puberty, Hygiene, and HIV* lessons to an online format. To an extent, teaching puberty lessons virtually actually made the experience more comfortable for some 5th graders, as the usual nervous energy and giggling could not be spread through the classroom as easily and students were able to turn their cameras off when they felt self-conscious. 50 of these lessons were taught for the Bellingham School District over Zoom. MBPP collaborated with the school district to deliver 16 of these lessons in-person, in classrooms where students were masked and physically distanced.

Even with the pandemic, MBPP's Education team was able to reach 2,200 students in the 2020-2021 school year at 33 locations!

For questions and wonders about our education program, please reach out to education@mbpp.org.

Members from Whatcom and Skagit Teen Council pose for a photo following Virtual Teen Lobby Day.



Serving Individuals with Intellectual and Developmental Disabilities

People with developmental disabilities are often overlooked or forgotten when it comes to human sexuality. This oversight leads to a plethora of barriers and stigma for the disability community including an increased probability of being victimized, lack of support services, lack of education about being disabled and LGBTQ+, and what it means to give and get consent. Stigma silences crucial conversations and has devastating results.

Through a generous grant awarded to MBPP, our Education department received training to prepare and equip our Community Health Educators with the tools necessary to provide sexual health education to those in our community who are differently-abled.

Since the launch of the program earlier this year, and in collaboration with the Bellingham Community Transitions (CT) program, a special education program within Bellingham Public Schools, we began training sessions relating to relationships, consent, boundaries, Identity, anatomy, puberty and hygiene, protection, and family planning.

To date, MBPP Educators have presented a series of five lessons with the CT program specific to relationships and boundaries, consent, sexual and reproductive anatomy and hygiene, pregnancy and protection, as well as conversations about sexually transmitted infections (STI's.)

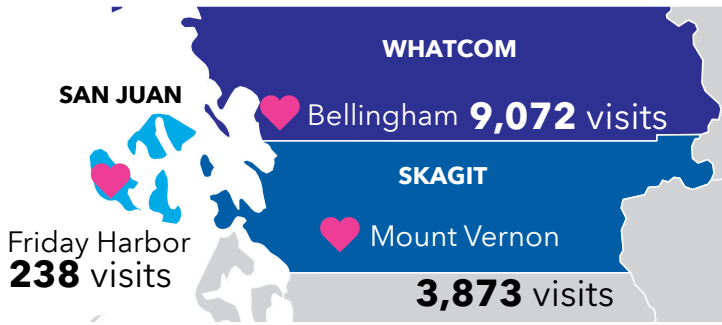
MBPP looks to expand our network of connections across Whatcom and Skagit counties in an effort to offer this comprehensive sexual health education opportunity to those within the intellectually and developmentally disabled communities we serve.

For more information or to schedule a training, please reach out to education@mbpp.org.



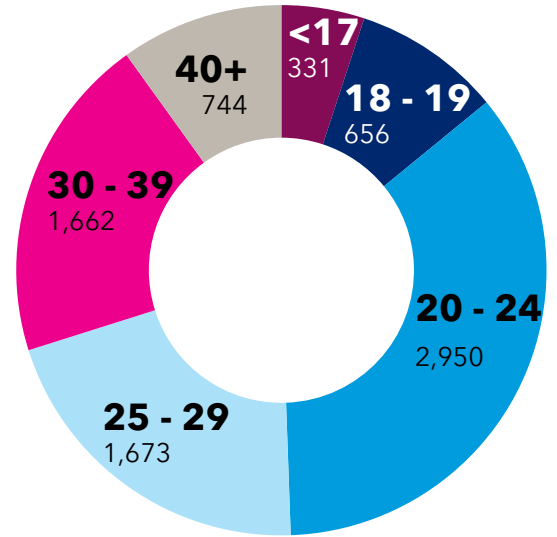
MBPP "Annual Exam" 2020

13,183 total visits



8,016 total patients

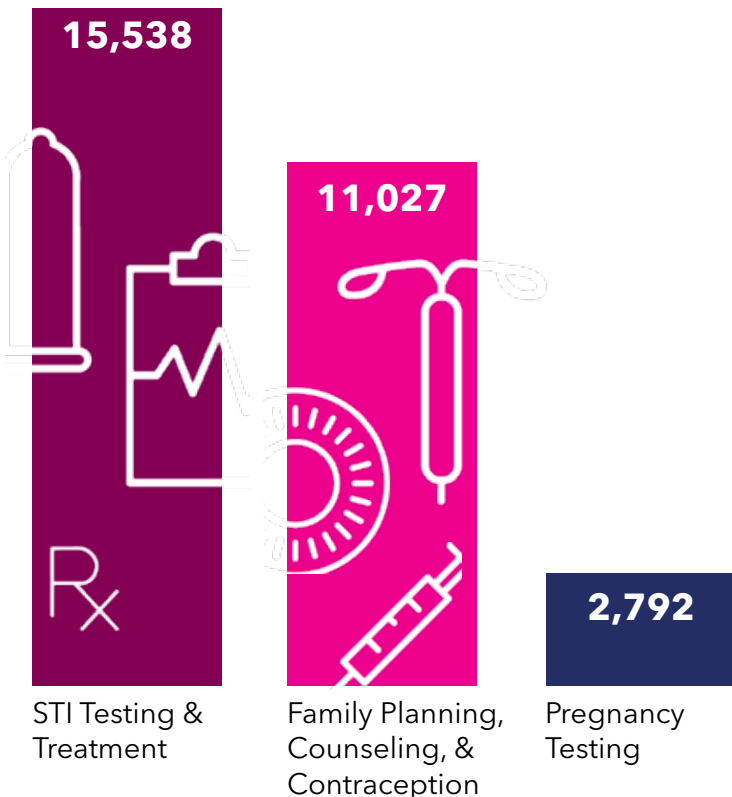
Patient Age Distribution



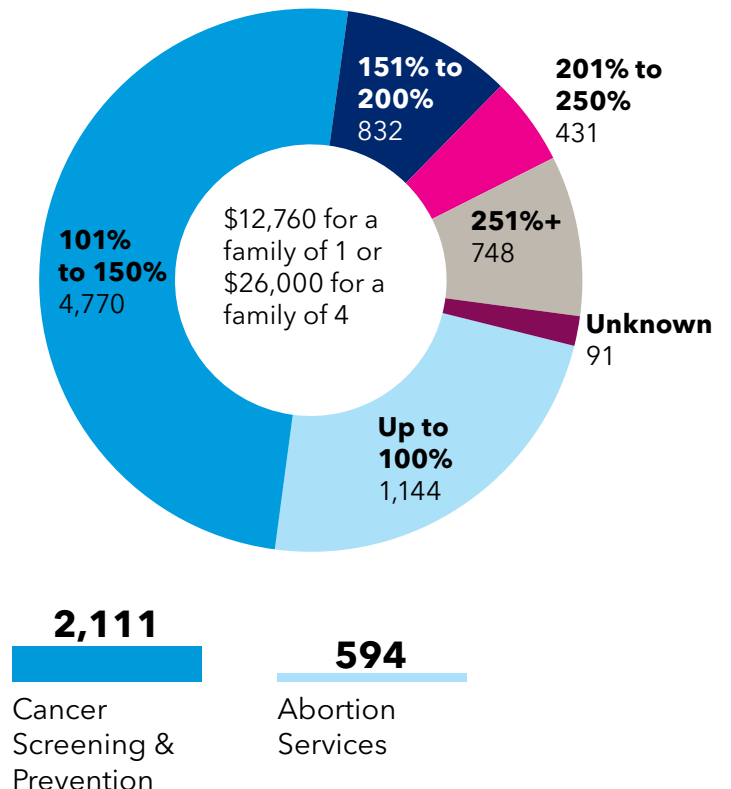
32,062 services

Select Clinical Services

In 2020, our health centers saw 8,016 patients, who collectively received 32,062 services over 13,183 clinical visits.



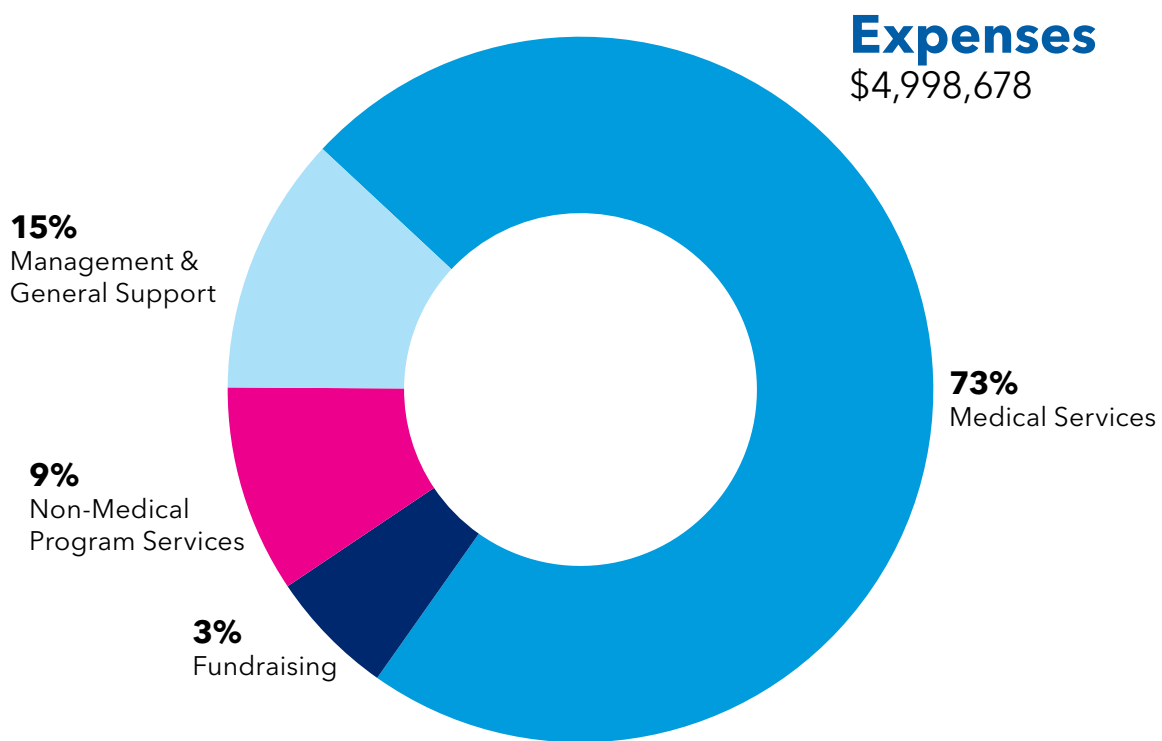
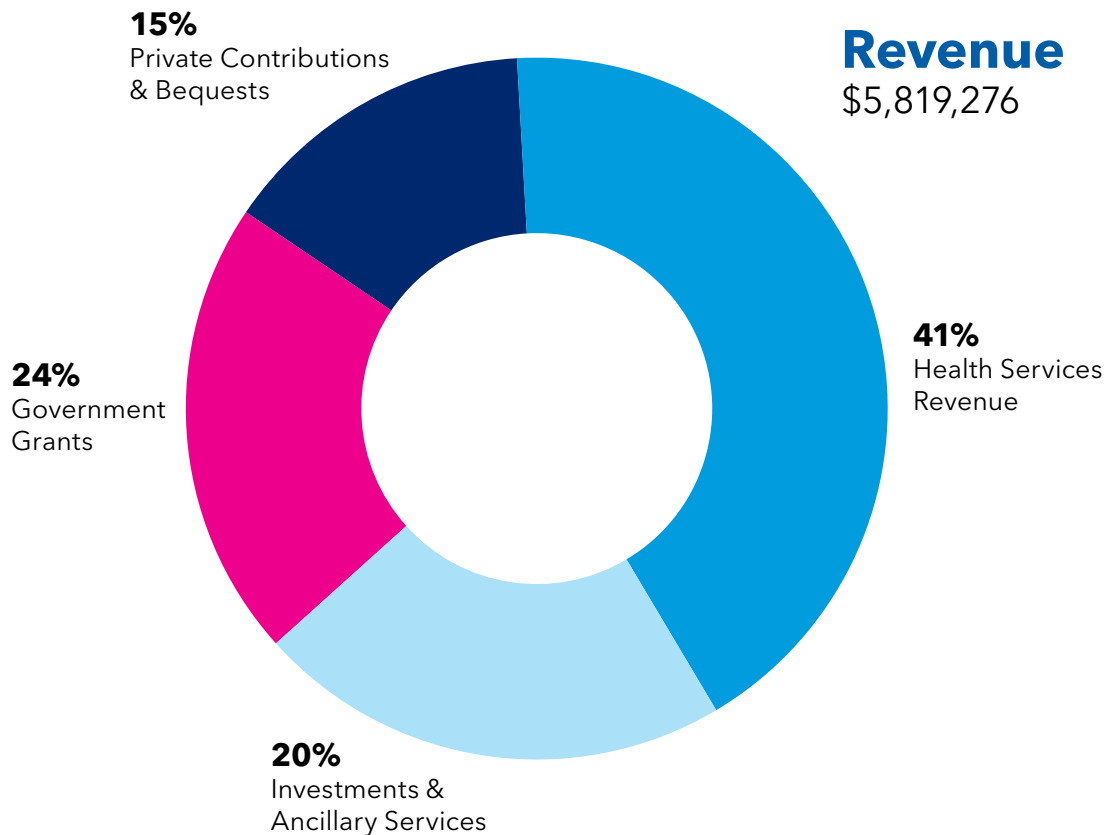
Number of Patients at Federal Poverty Level



2,111
Cancer Screening & Prevention

594
Abortion Services

Revenue and Expenses



Protecting Pregnant Patients

For decades, patients in Washington state experiencing miscarriages and ectopic pregnancies have had their treatment delayed or denied due to hospital policies, that are not grounded in evidence-based medicine, particularly in non-secular hospitals. These policies, which prohibit pregnancy terminations except in very limited circumstances, are discriminatory, create unjust barriers to care, serve no medical purpose, and endanger the health and lives of pregnant patients. For patients, especially those living in rural areas with only one health care facility available to them, these prohibitions can be insurmountable and life-threatening.

On May 10, 2021, Governor Inslee signed the *Protecting Pregnant Patients Act (SSB 5140)* which prevents hospitals from interfering with a qualified health care practitioner's ability to provide medically necessary care to a pregnant patient whose health or life is at risk. When the new law takes effect in March 2022, it will ensure that patients experiencing harmful pregnancy complications will receive the care they need when they need it.

In addition to protecting patients and providing them with the care we all deserve, this bill also protects providers from being fired or reprimanded for treating pregnant patients according to medical standards of care.

The *Protecting Pregnant Patients Act* is an exciting and necessary victory for patients, particularly as more secular hospitals are merged with religious hospitals and more restrictions on care are put in place. At MBPP, we will be monitoring compliance to these new rules and will continue to fight for health care for all, no matter what.



LGBTQ+ Inclusive Language Guide

MBPP is a progressive organization in which equity and inclusion are embedded in our organizational DNA. Planned Parenthood's vision is a world of equity where sexual and reproductive rights are basic human rights, where access to quality, affordable health care doesn't depend on who you are or where you live; where every person has the opportunity to choose their own path to a healthy and meaningful life.

Having shared language creates an understanding amongst people to help them communicate more effectively. The key to understanding language is to first notice and be mindful of the words you choose. Developing a shared language is an ongoing process that requires intention and time. By actively using this shared language, it can guide us through difficult yet courageous conversations.

Avoid Saying	Say Instead	Why?	Example
"Homosexual"	"Gay"	"Homosexual" often connotes a medical diagnosis, or a discomfort with gay/lesbian people.	"We want to do a better job of being inclusive of our gay employees."
"Born female" or "Born male"	"Assigned female/ male at birth"	"Assigned" language accurately depicts the situation of what happens at birth.	"Max was assigned female at birth, then he transitioned in high school."
"Female-bodied" or "Male-bodied"	"Assigned female/ male at birth"	"-bodied" language is often interpreted as pressure to medically transition, or invalidation of one's gender identity.	"Max was assigned female at birth, then he transitioned in high school."
"A gay" or "a transgender"	"A gay/transgender person"	Gay and transgender are adjectives that describe a person/group.	"We had a transgender athlete in our league this year."
"Transgender people and normal people"	"Transgender people and cisgender people"	Saying "normal" implies "abnormal", which is a stigmatizing way to refer to a person.	"This group is open to both transgender and cisgender people."
"Both genders" or "Opposite sexes"	"All genders"	"Both" implies there are only two; "Opposite" reinforces antagonism amongst genders.	"Video games aren't just a boy thing - kids of all genders play them."
"Ladies and gentlemen"	"Everyone," "Folks," "Honored guests," etc.	Moving away from binary language is more inclusive of people of all genders.	"Good morning everyone, next stop Picadilly Station."
"Mailman," "fireman," "policeman," etc.	"Mail clerk," "Firefighter," "Police officer," etc.	People of all genders do these jobs.	"I actually saw a firefighter rescue a cat from a tree."
"It: when referring to someone (e.g. when pronouns are unknown)	"They"	"it" is for referring to things, not people.	"You know, I am not sure how they identify."
"Hermaphrodite"	"Intersex"	Hermaphrodite is a stigmatizing inaccurate word with a negative medical history.	"What are the best practices for the medical care of intersex infants?"

How the CARES and CAA Acts Make it Easier to Donate

We are so appreciative of those who have been able to make charitable gifts to help our patients attain the care they need. As we navigate the second year of the pandemic, we would like to pass on some information from the Coronavirus Aid, Relief, and Economic Security (CARES) Act as well as the Consolidated Appropriations (CAA) Act, which was signed into law on December 27, 2020, and extends into 2021.

- **Cash Gifts** - Individuals who do not itemize their taxes may deduct \$300 in donations (\$600 in the case of a joint return) to a qualified non-profit in 2021. This charitable deduction enables a taxpayer who is one of the 90% who take the standard deduction to also benefit from their charitable gifts. The \$300 above-the-line deduction must be gifts of cash by a non-itemizer and may not be to a donor advised fund or supporting organization.
- **100% Charitable Deduction Limit** - For those who itemize taxes, individuals may deduct 100% of their AGI (up from 60%) for gifts of cash to charity (excluding donor advised funds and supporting organizations). The gift may be for any charitable purpose and is not limited to gifts for Coronavirus relief.
- **Required Minimum Distribution (RMD) Waiver** - The RMD is waived for IRA and other qualified retirement plan owners extending to 2021. This provision will permit IRA and other qualified retirement plan owners to retain funds in their IRAs without penalty. Individuals who are over age 70½ may still wish to use IRA funds to make a qualified charitable distribution (QCD) up to \$100,000.

As always, please consult your tax advisor/attorney for advice on your specific situation.



Your Gifts Matter

Everything we do at Mt. Baker Planned Parenthood is possible because of you. Our donors are the reason we can serve thousands of patients each year. Your gift supports medical services, educational programming, and advocacy efforts in your community today and in the future. Thank you!

Ways to Donate

CHECKS

Please make payable to MBPP and mail to:
Mt. Baker Planned Parenthood
1509 Cornwall Avenue
Bellingham, WA 98225

CREDIT CARD | ONLINE

Visit our secure website at:
www.wearepp.org/givemt baker

From your smartphone, use this QR barcode to be linked to our secure online giving form to make your donation today.



WORKPLACE GIVING CAMPAIGNS

If your employer conducts a workplace giving campaign through entities such as United Way, Benevity, YourCause, or TRUiST, you may be able to designate MBPP as a beneficiary.

CORPORATE MATCHING

Many companies will match employee donations. Contact your Human Resources department or business office to inquire about eligibility and matching gifts forms. State employees designation #0316035 and Federal employees designation #78843.

PLANNED GIVING | GIFTS OF STOCK

Please contact your financial advisor, estate planner, or MBPP's Development department.

What Legacy Do You Want to Leave?

Our Development department is here to assist you in meeting your philanthropic goals.
360.603.7703 | standwithpp@mbpp.org



Administration Office

1509 Cornwall Avenue
Bellingham, WA 98225
360.734.9007

Bellingham Health Center

1530 Ellis Street
Bellingham, WA 98225
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Mount Vernon Health Center


1805 East Division Street
Mount Vernon, WA 98274
360.848.1744

Friday Harbor Health Center

470 Reed Street, Unit A
Friday Harbor, WA 98250
360.378.6010

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In addition to communications from MBPP you may receive appeals directly from Planned Parenthood Federation of America (PPFA). Donations to PPFA support national media, advocacy, and international programs, rather than local services.

