

Testimony for Public Hearing  
Committee on Public Health  
March 20th 2018

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HB 5416 An Act Concerning Deceptive Practices of Limited Services Pregnancy Centers

Representative Steinberg, Senator Gerratana, Senator Somers, and distinguished members of the Public Health Committee,

My name is Xena Cordero and I'm from West Haven, CT. I'm here this evening to testify in strong support of H.B. 5416 An Act Concerning Deceptive Practices of Limited Service Pregnancy Centers.

I'm a UConn graduating Sociology and Urban and Community Studies double major. In the Fall I will be starting my first of a two year Masters of Social Work program. My academic goals end with me ultimately receiving my PhD., and becoming a professor in Social Sciences.

Last semester I lived in Hartford while I interned at NARAL Pro-Choice CT and True Colors Inc. I also was a clinic escort for Hartford GYN, where I witnessed firsthand the deceptive practices of the Crisis Pregnancy Center that shares the courtyard with the legitimate clinic. Throughout my time in Hartford, I fell in love with the city itself, and the reproductive justice work going on in the city. While I unfortunately will not be attending a Connecticut based Masters program, I fully intend on coming back to this state and city that I love and starting a family one day when I am ready.

I am in full support of this bill because I'm a Connecticut resident. I am someone who can get pregnant. I'm someone who wants to build a family here, and lastly, **and most importantly because of my own and other people's intersecting identities that already make receiving adequate or in some cases any healthcare nearly impossible.**

I am a young Queer Afro-Latina and, speaking from recent personal experience I know the roles that my intersecting identities play when I'm seeking out healthcare. About a year ago I discovered a lump in my neck. Along with that I had symptoms of pain, fatigue, hair loss, and weight gain among others. The scholar and worrywart that I am made me research day and night the possible causes. I went into my primary care provider's office back in New Haven for two separate appointments expressing my concern, and was scoffed at. I just needed Vitamin D, I was told, maybe I was just too stressed from school or work. It wasn't until I switched medical centers that I was even *examined* at an appointment. My recent diagnosis taught me two things. The first was what Google had already taught me, which is that I have thyroid cancer. It wasn't stress causing my symptoms like my old PCP suggested. And the second was that people do not take women seriously when they are seeking medical care, or help.

Crisis Pregnancy Centers do offer *some* helpful services to the community, but shaming and lying to women to convince them to carry an unwanted, unintended, or even a dangerous pregnancy to term is not one of them. Crisis Pregnancy Centers work in deceptive ways to prevent women from making educated decisions about their health because they don't believe we have the agency to do so.

Besides the trickery that CPCs commit on the surface, I want to bring to your attention one issue that has stuck with me since I started researching CPCs and discovering they outnumber real clinics in our state. The issue is that of LGBT people who seek reproductive healthcare. Members of the LGBTQ community, especially youth of color, particularly transgender youth have a higher risk of experiencing sexual violence, HIV/AIDs, and unintended pregnancies than their heterosexual peers.

Intersecting identities play a critical role in our access to healthcare, and to the healthcare we receive. When a cisgender straight woman walks into a CPC we know that she's often asked invasive, non-medically necessary questions, given anti-abortion counseling, and often told medically inaccurate information about contraception and abortion. I am concerned about what could happen to an LGBT person, particularly a member of the trans community who accidentally walks through the wrong door when they are seeking medical care and ends up in a religiously-based CPC. What happens when a person who isn't a *straight* woman or isn't a woman seeks reproductive healthcare at a CPC? The LGBT+ community already has the odds stacked up against them when seeking medical care. **Add on the identities of being young or poor or a person of color or trans or all four and they are statistically at more of a disadvantage.** It is extremely important for everyone to be able to find healthcare from trusted, culturally competent, licensed medical providers without being deceived or misled, and the LGBTQIA+ community should be no exception.

Anyone who can get pregnant and chooses, or wants to learn more about the option of abortion should be confident that they are receiving unbiased and factual options-counseling as well as medical care from a licensed medical provider.

In conclusion, I'd like to express my gratitude to the members of the committee because you have made a commitment to work towards protecting our state's public health.

I strongly support H.B. 5416 to limit the deceptive advertising practices of crisis pregnancy centers in our state. I urge the committee to move forward with H.B. 5416.  
Thank you for your time.