



# Oregon

John A. Kitzhaber, Governor

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Testimony in support of HB 2611A  
Tuesday, May 7, 2013

Senate Committee on Health Care and Human Services

Chair Monnes Anderson, Vice Chair Kruse, and Senators Knopp,  
Shields and Steiner Hayward:

The Chairs of the Oregon Advocacy Commissions are submitting testimony in support of HB 2611A on culturally competent care on behalf of the Oregon Advocacy Commissions.

Addressing disparities in access to effective health care for communities of color and women is a strategic priority of the Oregon Advocacy Commissions. This includes the overrepresentation of communities of color and women in health issues including diabetes, heart disease, and high blood pressure, and the underrepresentation of these communities in health screening, pre-natal care and other areas.

We believe that requiring documentation of education in providing culturally competent care for physicians, nurses, and allied health professionals is essential in assuring that in the moment that care is being provided, that it is delivered in effective and engaging ways for all Oregonians. Requiring training on delivery of culturally competent care for the providers is a key strategy in supporting professional excellence while improving outcomes for cultural and ethnic communities and women who face significant challenges to health care access and effectiveness. The OHA's work and expertise with these communities and health care professionals assures that as cultural competency is defined and training is identified, it will be reflective of the best thinking and practice statewide and nationally for delivery of such care.

The Oregon Advocacy Commissions urge the Committee members to positively consider this groundbreaking legislation and support it with your vote.

In 2013 the Oregon Advocacy Commissions are partnering with APANO (Asian Pacific American Network of Oregon), the Urban League of Portland, Oregon Latino Health Coalition, and AAUW to send a clear message to policy makers and mobilize communities of color and women on these issues. We believe that without culturally appropriate care in all aspects of health care provision, the disparate health statistics that you are reviewing today as part of the testimony of our partners will continue.

**OR Commission on Asian and Pacific Islander Affairs**

Stephen Ying, Chair  
Mari Watanabe, Vice Chair  
Legislative Liaisons:  
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Black and Latino Oregonians' health is 30 – 50% more likely to be negatively affected by diabetes, arthritis, asthma, heart attack, stroke and high blood pressure, and Asian Pacific Islanders are over-affected by high blood pressure. For all the affected communities, assuring that women have access to culturally competent care is critical. They serve their families in many roles including as the gateway for their families into health care and as long-term caregivers for multiple generations. Because of this women engage with the health care system in ways that are often different from the ways men do.

Pregnancy and childbirth are areas where cultural competency and sensitivity on the part of the medical professionals can affect the outcomes of care for a lifetime. As long as women live on average longer than men, there will also be a disproportionate number of elderly women needing medical care from a variety of cultural and ethnic communities.

The role of education for health care providers in improving their outcomes for communities of color must be part of the equation for success in Oregon, both in good health and economically as the toll of these conditions challenge families, state services and business.

Please join us in supporting HB 2611A as a step in the right direction for delivery of culturally competent care.

Signed:

Stephen Ying, Chair, Oregon Commission on Asian Affairs and Pacific Islander Affairs



Isaac Dixon, Chair, Oregon Commission on Black Affairs



Andrea Cano, Chair, Oregon Commission on Hispanic Affairs



Stephanie Vardavas, Chair, Oregon Commission for Women

