

Racial Justice Council Health Equity Committee

House Behavioral Health Committee –
December 18, 2020



Our Panel



Jackie Yerby, Policy Advisor for Behavioral Health and Health Licensing and Co-lead for Racial Justice Council Health Equity Committee

Olivia Quiroz, Executive Director, Oregon Latino Health Network and Racial Justice Council Health Equity Committee Member

Steve Allen, Behavioral Health Director, Oregon Health Authority

About the Racial Justice Council (RJC)



We must change how we listen to, engage with, respond to, and support Black, Indigenous and People of Color (BIPOC) and Tribal members in Oregon.

Leaders in the public sector, business community and non-profit sector must work with Black, Indigenous and People of Color to dismantle the structures of racism that have created grave disparities in virtually all of our social systems and structures, including: mass incarceration and criminal justice involvement, access to housing, health outcomes, economic opportunity and wealth creation, and educational attainment. The urgency could not be greater in this moment to channel and follow the voices of those people most impacted by historical and institutional racism in Oregon and create a system with them that fully supports us all.

Achieving this goal will require a new approach.

Establishing racial justice will take foundational reform and is why this Council will be inclusive of representatives from diverse backgrounds, while at the same time explicitly centering Black, Indigenous and People of Color. BIPOC communities have already been communicating the policies and investments that will have the most significant impact on their communities. The Racial Justice Council will ensure that prioritized recommendations are communicated to the Governor and the State Legislature to inform the next state budget and legislative agenda.

Racial Justice Council Members



Adriana Miranda
Akasha Lawrence Spence
Alexandra Appleton
Andrew Colas
Annie Valtierra-Sanchez
Bahia Overton
Bennie Moses-Mesubed
Bridgette McConville
Chi Nguyen
Chuck Sams
Cort O'Haver
Cynthia Richardson
Don Ivy
Dr. Danny Jacobs
Dr. Marisa Zapata
Felisa Hagins
Graham Trainor
Jan Mason

Jenny Pool Radway
Jesse Beason
Joth Ricci
Kayse Jama
Kyshan Nichols-Smith
Lamar Wise
Lauren Nguyen
Marcus Mundy
Marin Arreola
Michael Alexander
Michelle DePass
Miriam Vargas Corona
Nkenge Harmon Johnson
Reyna Lopez
Robin Morris-Collin
Serena Cruz
Tiffany Monroe
Yosalin Arenas Alvarez

RJC Health Equity Committee Charter



Recommend changes to state and agency health policies, practices, and structures to align them within a racial justice and health equity framework. The purpose is to make necessary institutional and statutory changes necessary to promote health equity, improve disaggregated data collection, and recommend interventions for racial health disparities in social determinants of health.

RJC Health Equity Committee Members

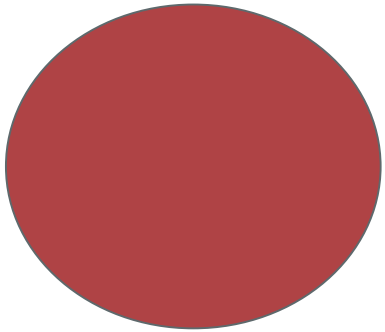


Alyshia Macaysa
Rep. Andrea Salinas
Annie Valtierra-Sanchez (RJC), Co-
Chair
Bahaa Wanly
Christel Allen
Coi Vu
Dr. Danny Jacobs (RJC)
Deborah Riddick
Dr. Derick Du Vivier
Elizur Bello
Dolores Martinez
Jackie Mercer, Co-chair
Jaylyn Suppah
Jenny Pool Radway (RJC)

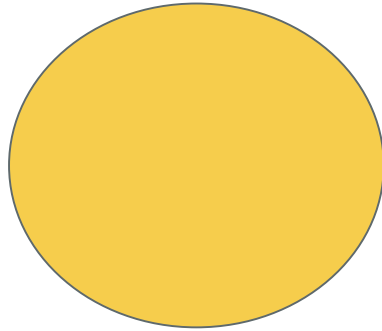
Jeremiah Rigsby
Dr. Kelly Gonzales
Dr. Kevin Ewanchyna
Marin Arreola (RJC)
Nelva Ojeda
Olivia Quiroz
Ruby Moon
Serena Cruz (RJC)
Sen. Tim Knopp
Dr. Tyler TerMeer
Yesi Castro
Dr. Zeenia Junkeer
Zhenya Abruzzese

Health Equity Committee Focus Areas

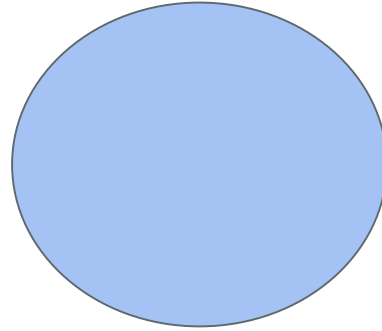
Behavioral Health



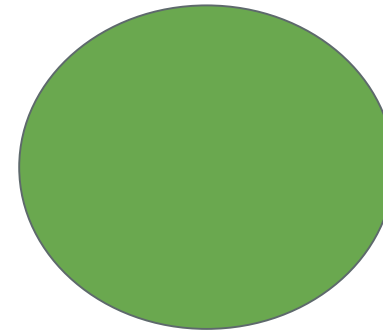
Health Care Access &
Inclusion



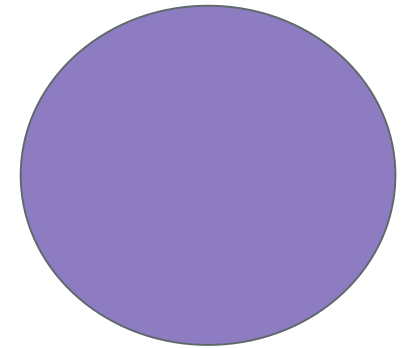
Workforce, CCOs &
Delivery of Health
Care



Data



Public Health &
Prevention



Health Inequities



1. The lack of culturally responsive mental health providers limits access to services.
2. Insufficient resources are invested in communities of color.
3. The Latinx/BIPOC* community is not resourced to adequately deliver prevention services that would decrease the burden on the healthcare system.
4. Community strengths are not mobilized effectively to support mental and emotional support.
5. There are gaps in data about Latinx/BIPOC* emotional mental health because data is inappropriately collected or not collected at all.

*Black, Indigenous, Latino, Latina, Latinx, Asian, Pacific Islander, immigrant, refugee, Native American, and Tribal communities



Investment towards Health Equity



- Ensure that communities historically and currently disproportionately affected by health inequities are prioritized.
- Latinx and other communities of color are at higher risk for physical, mental, and financial problems due to the COVID-19 pandemic.
- Invest state and federal funding in the short-term and long term response and recovery.

RJC Health Equity Recommendations



Address Coverage Gaps & Increasing Access to Health Care:

- Funds Cover All People, a pilot program to provide state-based coverage to undocumented adults, DACA recipients, legal residents, and young adults who age out of Cover All Kids, \$10M.
- Funds Compact of Free Association (COFA) premium assistance program and dental coverage for COFA residents, \$2.6M.
- Funds high-quality reproductive health services for the Oregon Health Plan (OHP), \$2M.
- Improves access to the Oregon Health Plan (OHP) by funding the Community Partners & Outreach Program to provide health services navigation, and improve language access and quality, \$7.8M.

RJC Health Equity Recommendations



Address Coverage Gaps & Increasing Access to Health Care:

- Funding to support traditional health worker licensing program, \$600,000.
- Continue to build on Oregon Regional Health Equity Coalitions, \$5.8M.
- Behavioral Health and Health Care Workforce Diversification, \$27.5M.



Governor's Behavioral Health Advisory Council (GBHAC)



Scope/Target Population:

- Adults with serious mental illness and co-occurring substance use disorders
- Transition-aged youth (age 12+)

Directed to provide specific recommendations in order to ensure:

- Health equity
- Early detection and effective treatment
- Timely access to the full continuum of behavioral health care
- Treatment responsive to individual needs and leads to meaningful life improvements
- Access to affordable housing that offers independence and close to community resources
- Improved supply, distribution, and diversity of the BH workforce to provide appropriate levels of care and access to care in the community

GBHAC Recommendations



Programs and Services:

- Programs that are directly responsive to and driven by persons of color, tribes, and people of lived experience.

Housing and Residential Supports:

- Increase OHA funding for Rental Assistance and create a flexible housing and community-based living fund to fill gaps in the residential continuum for people of color and tribal communities, including recovery housing.
- Develop additional Residential Treatment Facility and Secured Residential Treatment Facility capacity, including facilities specializing in the young adult population (age 17.5 – 25).

Workforce:

- Behavioral health workforce incentive fund to increase the number of persons from communities of color, tribal communities and rural communities in workforce.

Governor's Recommended Budget



- Workforce funding to diversify Oregon's behavioral health and medical workforces so that they better reflect the communities they are serving.
- Medicaid funds to support tribal-based practices and strengthens pathways for further developing a tribal behavioral health workforce.
- Expand residential services for young adults.
- Funds peer run respite care centers.
- Invests in community-based services and care coordination designed to reduce the influx of people from the criminal justice system into the Oregon State Hospital.

Thank You.

