



# Health Department

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March 26, 2019

Ways & Means Committee  
900 Court St, NE  
Salem, OR 97301

Good morning Senator Beyer, Representative Nosse, and members of the Committee, my name is Kim Toevs and I am the Director for Adolescent Sexual Health Equity and STD/HIV/HCV Programs at Multnomah County Health Department. I am here today to support \$47 million in additional investments for public health to ensure our local public health authorities are able to address the rising number of infectious diseases and environmental health threats and to continue to prevent the leading causes of death and disease in Oregon.

While the national Affordable Care Act and the Oregon health care reform activities have helped increase Oregon access to clinical health care, most of what makes people healthy happens outside the clinic walls.

Public health has unique core responsibilities to prevent disease and promote healthy communities. We protect clean air, food, and water. We promote healthy choices in nutrition, physical activity, tobacco and substance use, sexual health, family planning, and violence prevention. We provide data and technical support to policy makers about how to improve laws, policies, workplaces, and built neighborhood environments to support health. We specifically focus on health improvements among communities of color and lower income individuals who have a higher burden of infectious and chronic diseases, maternal and child health inequities, injuries and exposure to violence.

We need the investment of more state funds to support these core public health functions. Before the legislature's 2017-2019 \$5 million statewide investment in public health, Oregon ranked 46th out of 50 for per capita public health funding in the U.S. Multnomah County partnered with Clackamas County, Washington County, and the Oregon Health Equity Alliance to use this funding to increase our capacity to use data regionally to identify health issues and outbreaks and to understand who has them, where, and why. This is important for the resurgence of old fashioned infections like syphilis or vaccine-preventable measles as well as for newer diseases like Ebola or Zika.

We are also using these funds to work on outbreak and emergency management plans for diseases like Hepatitis A that have spread quickly through homeless populations elsewhere in the US. Additionally, we are gathering information from health care partners and community

members about latent tuberculosis and Hepatitis C to improve a coordinated system to prevent, test, and effectively treat people at highest risk.

I urge you to fund the Public Health Advisory Board's plan to continue to close the gap on public health funding for Oregon residents, so that all residents, regardless of their zip code or county, receive the same minimum threshold of quality public health services.

Thank you for the opportunity to talk with you today,

Kim Toevs, MPH

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