

2/4/2020

We are writing this letter in support of HB 4161, a bill that will offer support for Regional Health Equity Coalitions (RHECs) to grow and develop their capacity to support statewide health equity efforts.

Regional Health Equity Coalitions (RHECs) are autonomous, community-driven, cross-sector groups. The RHEC model works by building on the **inherent strengths of local communities** to meaningfully involve them in identifying sustainable, long-term, policy, system and environmental solutions to increase health equity for communities of color, and those living at the intersection of race/ethnicity and other marginalized identities.

Long-term community engagement is critical to sustaining the involvement of communities in any type of decision-making and activities. Support and funding of community-lead initiatives is an approach that is tailored to the specific, unique needs of the particular community where activities are being implemented. The success of regional efforts depends on local community members for the foundation to a comprehensive, holistic approach to community work.

The importance of codifying the definition of RHECs is central to this bill. The model of RHECs was designed intentionally to ensure that communities most impacted by health inequities were at the forefront of policy, systems and environment change work that impact their communities.

These communities include; Oregon's nine federally recognized Indian tribes, immigrants, refugees, migrant and seasonal farmworkers, low-income populations, persons with disabilities and lesbian, gay, bisexual, transgender and questioning communities in rural and urban areas, with communities of color as the leading priority.

Regional Health Equity Coalitions are completely independent of coordinated care organizations and government agencies and backbone organizations may be a federally recognized Indian Tribe in Oregon or a community based non-profit organization.

We support the model of RHECs that includes uplifting and centering the impact of structural, institutional, and interpersonal racism on the health and well-being of communities of color. The model also prioritizes meaningful engagement of communities most impacted to lead efforts; and honors community wisdom by ensuring policy and system change solutions build upon community strengths.

We support this bill because if Regional Health Equity Coalitions (RHECs) grow and develop their capacity, we grow and develop our capacity.

Sincerely,

Izzy Meda, Executive Director
Familias en Acción