

February 4, 2020

To Whom It May Concern:

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.

Solutions addressed by community-led coalitions are more likely to succeed long-term, due to the fact that there is buy-in and commitment to successful implementation. Additionally, when local communities are immersed in the decision-making process for their own community, there is an empowering effect that builds upon itself to help create a coalition of advocates.

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.

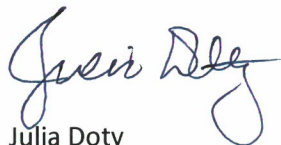
Northwest Housing Alternatives' participation in the Eastern Oregon Health Equity Alliance enables us to bring the lived experience of our more than 200 low-income households in eastern Oregon to our local RHEC, bringing forward the most pressing issues of the community as reported by that community. Without this forum, the voices of those populations who are most likely to be marginalized and least likely to be prioritized would not be heard.

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 HB 4161 and hope you can consider this

Sincerely,

A handwritten signature in black ink, appearing to read "Julia Doty". The signature is fluid and cursive, with the first name "Julia" written in a larger, more prominent script than the last name "Doty".

Julia Doty

Director of Programs

Northwest Housing Alternatives