



## **Testimony in Support of Senate Bill 70**

February 3, 2021

Senate Committee on Health Care

Russell Lum

Good afternoon Chair Patterson, Vice Chair Knopp, and members of the committee. My name is Russell Lum, I am a political organizer for Oregon Nurses Association (ONA). We represent 15,000 nurses – including RNs and advanced practice nurses – and allied health workers. Oregon Nurses Association supports SB 70. We support requiring OHA to work with regional health equity coalitions because it is an important step in operationalizing aims – that OHA holds, and that ONA holds – to make Oregon an equitable state for health care access and outcomes.

Racism – and other systemic injustices, but as we relate to SB 70 we mean to highlight especially racism – is in the fabric of Oregon’s history, its treatment of its residents of color, and its health challenges. It is plainly harder for people of color to find in their health care landscape options that would be high-quality, comprehensive, affordable, and approachable from cultural and linguistic lenses.

The results are evident: worse outcomes in maternal and child health, higher levels of chronic conditions, and higher levels of mortality, which is all the more unacceptable in a COVID-19 pandemic that has brought all eyes on the health system and on preventable death.

The regional health equity model asks health care delivery to start from the bottom and ask how racism and other systemic injustices are locking out certain populations, locality by locality. It relies on local voices and validation of the community’s experiences, which is critical in a results sense, as well as in its allegiance to equity principles.

In this vein, we hope to see the Legislature bake regional health equity into the care the State has underlying responsibility to provide, for reasons of both promising impact and socially just approach.

ONA supports SB 70 to value the life experiences of communities of color and other marginalized populations and to join in the work – and welcome others to the work (be they provider-side, or State-side, or tribal, or community) – of arriving at health equity.