

Date: 3/22/2021

Chair Smith Warner and Members of the Committee,

For the record, my name is Lina Soares. I am a Licensed Clinical Social Worker (LCSW) working in hospice and mental health care in Corvallis, OR. I am writing to request your support for HB2337.

HB 2337 declares racism a public health crisis in Oregon. Racism causes harm, trauma, illness, and death to Black, Indigenous, and people of color (BIPOC) Oregonians. HB 2337 acknowledges that Oregon's very founding as a state was rooted in racist ideals, and the damaging impact of these and other racist policies continue to exist within our present-day policies and systems. Further, this bill signals the need for accelerated, intentional actions to heal these injustices and articulates six initial strategies and investments to address health inequities.

I am supporting BH 2337 as a white person of European ancestry. I have witnessed the detrimental effects of racism to BIPOC Oregonians in my roles as resident and LCSW. Racist policies and ideas have, and continue to create a wide discrepancy in health, economic, social, legal and academic outcomes. Our Black, Indigenous, and BIPOC neighbors are dying much earlier and have more chronic illnesses than they should (and than our white neighbors). Addressing racism as a public health crisis will allow our communities to move toward a equitable society, removing barriers, establishing equitable power, access to resources and opportunities, and beginning to heal the harm done by centuries of racism and trauma. Although, as a white person I have benefitted from systems built on white supremacy (starting the moment I immigrated to the US from Germany as a teenager), racism harms all of us. The ill physical and mental health created by racism results in increased financial and social costs to all of us. All Oregonians will benefit from preventing these costs, and from mitigating any past and future harm and violence toward Black, Indigenous and people of color Oregonians.

HB 2337 was developed by the Oregon Health Equity Task Force which is composed of leaders and community-based organizations representing BIPOC, Tribal, and Immigrant and Refugee communities and includes six initial strategies that are responsive to the specific needs of their communities to reduce racial and ethnic health disparities.

I support all six strategies outlined in HB2337, and want to emphasize the importance of removing barriers to increase access and quality of care in BIPOC communities (strategy 6), as well as increasing community voice in the legislative process (strategy 5), and meaningfully investing in community engagement to identify future strategies (strategy 2).

Thank you for the consideration and for your service. I urge you to support HB 2337.

Sincerely,
Lina Soares,
Corvallis