

March 22, 2021  
Chair Smith Warner and Members of the Committee,

I am a public health professional, and I teach in the public health program at Pacific University in Forest Grove, 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.

The research on effects of racism on health is vast and convincing. Institutionalized racism and in social, social, health, economic, legal, and academic areas mean unequal access to resources, leading to disparities in a myriad of health outcomes. Further, stress from a lifetime of interpersonal and institutionalized racism lead to an overburden of chronic disease in BIPOC communities. In fact, chronic illness is greater for many communities of color. For example, African Americans (38.9%), Pacific Islanders (36.1%), American Indians and Alaska Natives (33.4%), and Latinos (29.1%) are more likely to experience high blood pressure in this state. (Oregon Behavioral Risk Factor Surveillance System, Preliminary race reporting data file, 2015 – 2016).

Racial justice requires the formation and purposeful reinforcement of policies, practices, ideologies and behaviors that create equitable power, access, opportunity, treatment, and outcomes for all people regardless of race and redistribute resources to invest where inequities are greatest. It is time to act to dismantle institutionalized white supremacy.

Prevention is paramount to a healthy population and also makes economic sense. Health inequities are preventable issues! When we address inequities, they provide significant cost savings to health systems and also to many other systems related to the social determinants of health. More importantly, addressing these issues of racism improves the health and quality of life for all 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.

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

Sincerely,  
Jana Peterson-Besse  
Forest Grove