

Date: March 23, 2021

Dear Chair Smith Warner and Members of the Committee,

On behalf of the Oregon Community Health Workers Association (ORCHWA) in Portland, Oregon I am writing to request your support for **HB2337**.

ORCHWA is the statewide professional association for community health workers (CHWs) in Oregon. CHWs are essential public health workers and trusted community members who share racial, ethnic identity(ies), language(s), and/or lived experience with the communities they serve. Using a variety of methods, CHWs promote individual and population health and wellness, racial equity, and the 'Triple Aim' of better health, better care, and lower costs.

ORCHWA's mission is to serve as a unified voice to empower and advocate for CHWs and our communities. Our work is rooted on a foundation and values of CHW and community self-determination, social justice, and equity.

In Oregon, a state founded in anti-Black exclusionary laws and racist policies, discrimination in health, education, social service, economic, and judicial systems are root causes of health and additional disparities experienced by BIPOC Oregonians throughout history and today. The State's racist history is our current reality.

Racism is a public health crisis in Oregon. The State of Oregon must acknowledge and act on racism as an emergency with public health crisis response protocols. **HB 2337 declares racism a public health crisis in Oregon** and signals the need for accelerated, intentional actions to address systemic injustices that continue to harm BIPOC 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 communities with lived immigrant and refugee experience. HB 2337 articulates six initial strategies and investments that are responsive to the specific needs of communities most impacted to reduce racial and ethnic health disparities:

- 1. Expand and support the collection of Race, Ethnicity, Language, and Disability (REAL-D) data.
- 2. Meaningfully invest in community engagement to identify future strategies.



- 3. Designate a Health Equity Policy Analyst position to disrupt policy from maintaining racist outcomes.
- 4. Increase health equity through language access.
- 5. Increase community voice in the legislative process
- 6. Remove barriers to increase access and quality of care in BIPOC communities

These strategies align with ORCHWA's priorities and practices. We work in partnership with the Oregon Health Equity Coalition, CHWs, community-based organizations, and additional stakeholders to address root causes of inequities and promote a more just, interconnected society—one without barriers to individual and community self-determination and empowerment. We believe, to be effective, strategies that pursue health and racial equity center solutions that are informed, led, and driven by communities whose health, wellbeing, and sovereignty are most prohibited by exposure to structural anti-Blackness, racism, discrimination, and marginalization.

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

Sincerely,

Angie Kuzma, MPH, CHW Policy & Data Manager ORCHWA