

## WRITTEN

Chairs Lieber and Kropf, members of the Committee, my name is Jose Luis Garcia. I was born in Colima, Mexico, and have lived in Oregon for over 30 years. I have worked for more than two decades in behavioral health, providing culturally specific substance use treatment services, gang prevention services, employment services, and housing services to the local Latino/a/x/indigenous community.

I am the founder of Juntos, LLC and Juntos NW, a non-profit; we work to improve access to behavioral health systems that impact Latino/a/x/indigenous communities through outreach, education, and mobilization. We provide outreach and harm reduction navigation services to Latino/a/x, and indigenous communities in need of substance use recovery support. We also provide spaces for Black, Brown and Indigenous professionals to network, support, and learn from each other.

Our outreach and engagement efforts are focused on creating awareness and eliminating the stigmas that prevent our Latinx community from accessing services. In addition, we provide culturally specific training in Spanish to support the work of many Latino/a/x behavioral health professionals in Oregon. It's our commitment to building a strong workforce that ensures our community has access to culturally and linguistically-specific care and support.

Juntos is also a member of the Oregon Black Brown Indigenous Advocacy Coalition (OBBIAC), a coalition of Black, Brown, and Indigenous providers of substance use disorder/mental health services. Our purpose is to build the power of people and communities most negatively impacted by the failed "War on Drugs", and to uphold and support organizations of Black, Brown, Indigenous communities. Many of us have experience as state trainers, local agency practitioners, executive directors, and writers of Oregon Administrative Rules. We've sat on hiring committees, state-level task forces, and coalitions. We've watched the evolution of this state's prevention, harm reduction, treatment, and recovery infrastructure.

At the heart of Measure 110 is an emphasis on supporting culturally and linguistically-specific services to help heal the communities most impacted by the war on drugs. Thanks to Measure 110 funding, Juntos has been able to partner with other culturally-specific organizations to found a BHRN specifically for our Latinx communities. Culturally-specific services are particularly important for Latinx communities because of language barriers and the limited access to services experienced by those who are undocumented. I don't think anyone knows us like we do. Working with our community, we have connections because we had the same lived

experience. We know what those difficulties are. I'm a first-generation Mexican...we've walked in the same shoes as our clients. We've been discriminated against. Nobody knows the pain that we suffer like we do. And that's why it's important to have culturally specific services.

For years the Latino community in Oregon has been facing significant disparities in access to behavioral health services which demand immediate attention. Culturally and linguistically specific services **are just not available for my community!** These disparities are causing long term harmful consequences to my community, leading to an increase in health problems, mental health, substance use, violence, crime, and exacerbation of existing social and economic disparities. With the growing population of Latinos in Oregon, it is crucial to address the gaps in service provision, and to ensure that the Latino community has access to the resources and services they need to thrive.

With Measure 110 funding, Juntos supported the improvement of culturally specific and linguistically specific services by conducting culturally specific initiatives that support the needs of the Latinx/indigenous community. These activities include: Culturally specific outreach, prevention and harm reduction events, community presentations, behavioral health conferences, distribution of lifesaving naloxone, and direct client assistance, such as rent assistance, eviction prevention, basic client needs, groceries, transportation assistance, as well as navigation services to treatment and recovery support. **These resources were rarely or not available for my community prior to M110!** The Latinx/indigenous community needs specialized services and we can't do this work on our own. Working together with members of Latino/a/x BHRN, we're able to work with each other to ensure Latinx individuals don't fall through the cracks. The reality is that Latinx individuals need a continuum of care, and recovery is a lifelong process that requires a lot of support. This level of support never existed, and we are just starting to see the positive impact it's creating. This is the kind of investment that is needed to truly address the addiction crisis in our community.

I recognize that more treatment is needed, especially for the clients we serve. I would be happy to meet with the Coordinating Care Organization (CCOs) to collaborate on the development of culturally specific treatment programs to ensure they are inclusive, truly meet the needs of our community, and **most importantly, expand treatment beds for the Latinx/indigenous community, which is their responsibility.**

I am deeply concerned about proposals that would expand the criminal system as a mode of treatment because it will target my community. It will be more expensive, less effective, and more harmful to my community, which already faces significant health disparities; that is not the solution. The solution is to continue expanding services,

including adding additional treatment beds, without inflicting harm on marginalized communities who need treatment.

Also, a lead model program was implemented in Multnomah County prior to the pandemic, and only whites benefited from the program, even though the program was intended as a diversion for African Americans. These types of diversion programs do not work for our community.

Thank you,

Jose Luis Garcia,  
Executive Director,  
Juntos