Chair Patterson and Vice-Chair Hayden,

For the record, my name is Esther Kim and I am writing to express my strong support of Senate Bill 564, which provides additional resources for the Regional Health Equity Coalitions (RHEC). Hired as a limited duration tobacco cessation coordinator in 2018, I am now one of the co-directors of the Oregon Health Equity Alliance, which serves Clackamas, Multnomah, and Washington counties. In my five years at OHEA, I have witnessed and worked to address the pressing needs of health disparities and improve access to health equity for Black, Indigenous, and People of Color (BIPOC) communities.

As autonomous, community-driven, cross-sector coalitions, RHECs play a crucial role in bridging gaps between communities and local and state government, health systems, and other institutions. Our work increases community engagement, supports health equity efforts, and drives systems and policy change for a more just and equitable society.

However, due to increased need, rising inflation and insufficient funding, our coalitions have struggled with capacity building, sustainability, and adequate outreach to BIPOC communities. Inadequate funding has only added to the already stretched capacity of communities most impacted by the global pandemic, housing and economic instability, the overturning of basic human rights and bodily autonomy, continued environmental devastation from rapid climate change, and the ever shifting civil landscape of our society.

Here are some highlights of work OHEA has been advocating for during the pandemic:

- Redistributed almost \$200,000 of COVID-19 relief funds to support access to food, housing, PPE, and other supplies with our steering committee organizations and Community Action Teams, cohorts of community members of color to increase their community advocacy and policy organizing skills.
- Organizing and advocating with the BIPOC Decolonizing Data Council for our public health partners to modernize their data collection practices with relation to equity, racial justice, and serving communities most impacted by health disparities and negative social determinants of health.
- Raising and distributing relief funds and supporting those suffering from the recent heat waves and wildfires.
- Partnering on the Racism is a Public Health Crisis Taskforce for the advocacy of passing HB4052 in 2022 and House Bills 2918 and 2925 for the continued support of implementation in the current legislative session.
- Partnering with our Regional Public Health Modernization local public health departments on data modernization processes and community centered partner practices.
- Working with stakeholders to address the impact of the COVID-19 pandemic.

- Informing reproductive health policy recommendations upon the repeal of Roe v Wade and access to reproductive health care access.
- Convening BIPOC community members for health equity organizing opportunities through policy and advocacy strategies, community engagement and outreach, and organizing their own projects and giving feedback to health systems.

Our responses to the pandemic alone show the impact of RHECs in our communities, which has been built over 10 years of collective organizing, outreach, and advocacy across Oregon. In light of these challenges, the Regional Health Equity Coalitions are requesting additional resources to better serve our communities, which includes additional capacity and resources for RHEC's as we expand from 10 to 15 across Oregon. I urge you to support SB 564 and invest in the Regional Health Equity Coalitions. These resources will allow us to continue to advocate for the health equity needs of all Oregonians.

In Solidarity,

Esther Kim they/them
Co-Director, Advocacy and Policy
Oregon Health Equity Alliance