

Date: 2/27/23

Chair Nosse, Vice Chairs Goodwin and Nelson, and Members of the Committee,

For the record, I am writing on behalf of Health Care for All Oregon (HCAO). I am writing to request your support for **2918 and 2925**. Racism causes harm, trauma, illness, and death to Black, Indigenous, and people of color (BIPOC) Oregonians.

With the passage of House Resolution (HR) 6 in the 2021 session and HB 4052 in 2022, the Legislature has declared racism a public health crisis and made a commitment to fund and implement the strategies developed by the Oregon Health Equity Task Force, composed of leaders and community-based organizations representing BIPOC, Tribal, and Immigrant and Refugee communities.

Without the passage of the bills before you today, HB 2918 and HB 2925, the vision behind HB 4052 and the Task Force that developed it will not happen. HB 2918 will provide the funds needed to implement the pilot mobile health unit that received one year of funding but is intended to be a five-year pilot. These mobile units are intended to be part of the public health approach of preventing illness, disease, injury, and death. They remove barriers enabling increased access and quality of care in BIPOC communities through culturally and linguistically appropriate mobile health units.

HB 2918 will continue the work already well underway by OHA and its advisory council. The Oregon Health Authority (OHA) will offer grants to one or more entities to pilot two mobile health units using a culturally and linguistically appropriate model to specifically serve BIPOC communities.

HB 2925 honors the time committed already by so many community members. It extends the timeline for the Health Equity Advisory Leaders and the Indigenous Equity Action Council convened by The Oregon Advocacy Commissions Office to meet, discuss, research and make policy recommendations that improve health outcomes of communities of color across the state from June 2023 to June 2026.

Additionally, HB 2925 extends the timeline for OHA to develop recommendations on how to fund intervention programs designed to prevent or intervene in the health conditions that result in inequitable and negative outcomes.

As health professionals we know that chronic stress, trauma, and violence not only impact physical wellbeing, but also has psychological implications. Studies have shown that

discriminatory police stops are associated with negative mental health outcomes such as anxiety, depression, and posttraumatic stress disorder. (APHA, 2018, Addressing law enforcement violence as a public health issue).

Health inequities are preventable issues that when addressed provide significant cost savings not only to health systems, but also 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.

This effort will look like many similar ones out there. Racism didn't happen overnight and with one action and dismantling systematic racism will take many years, multiple legislative concepts, policies, and community pushes.

Thank you for the consideration and for your service. I urge you to support HB 2918 and HB 2925.

Sincerely,

Zainab Alidina on behalf of Health Care for All Oregon (HCAO)